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Trade to

LEICESTER COUNTY COUNCIL

ANNUAL REPORT

of the

COUNTY
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1963



G. H. GIBSON, M.B., Ch.B., D.P.H., COUNTY MEDICAL OFFICER OF HEALTH TELEPHONE: LEICESTER 20451





LEICESTER COUNTY COUNCIL

ANNUAL REPORT

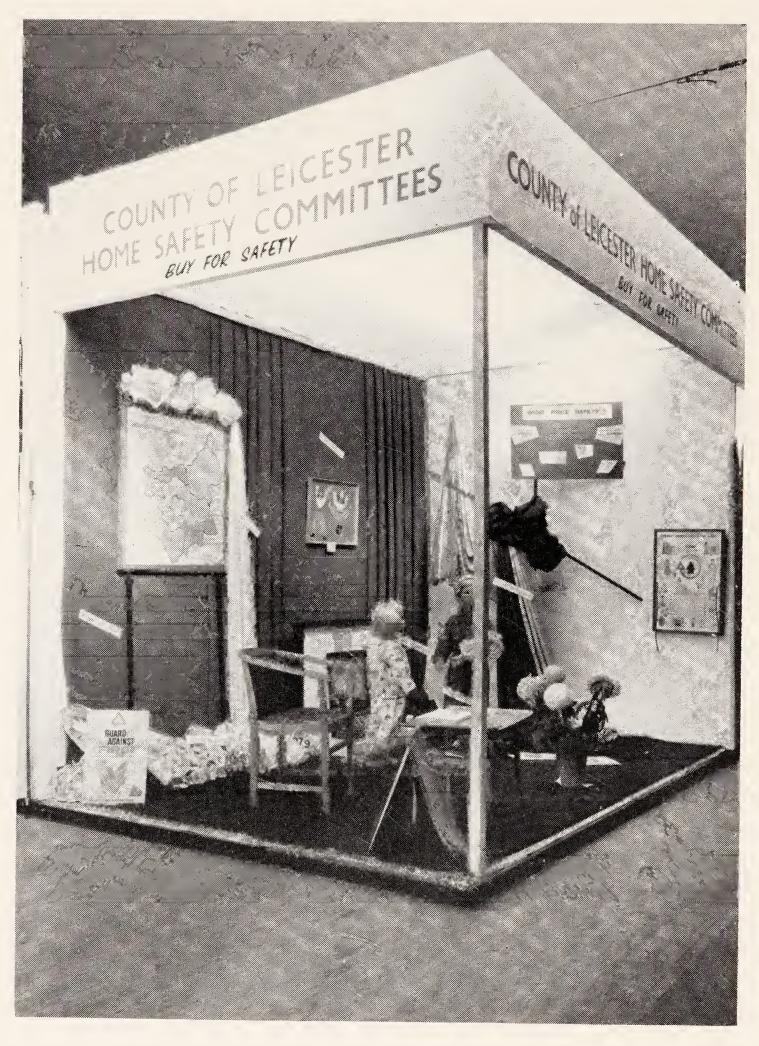
of the

COUNTY MEDICAL OFFICER OF HEALTH FOR THE YEAR 1963

G. H. GIBSON, M.B., Ch.B., D.P.H., COUNTY MEDICAL OFFICER OF HEALTH TELEPHONE: LEICESTER 20451

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County of Leicester Home Safety Display—Home Life Exhibition, Granby Halls, Leicester. September 1963

CONTENTS

							PAG
INTRODUCTO	RY LETTER (OF COU	NTY ME	DICAL	OFFICI	ER OF	
HEALTH	• •	• •	• •	• •	• •	• •	
COMMITTEE							
COMMITTEE	• •	• •	• •	• •	• •	• •	,
STAFF OF DE	PARTMENT						1.4
	1 1114 1 1411714 1	• •	• •	• •	• •	• •	10
DISTRICT ME	DICAL OFFIC	CERS OF	HEAL	ΓH		• •	14
					• •		
STATISTICS A			'IONS C	F THE	AREA	•	
Natural and S	Social Condition	s					15
General and S	Statistical Summ	ary of the	County	• •	• •		15
Population	• •	• •	• •	• •	• •		16
Live Births Stillbirths	• •		• •	• •	• •	• •	18
	Early Neo-nata	1 Dooths	• •	• •	• •	• •	19
Infant Mortal	ity		• •		• •	• •	20
Maternal Mon	.a. 1!a	• •	• •		• •	• •	21
Deaths	• • • • • • •	• •	• •	• •	• •	• •	23 24
					• •	• •	24
GENERAL PRO	VISION OF H	EALTH	SERVIC	ES FOR	THE A	REA:	
National Heal	th Service Act,	1946:					
	_						
Section 21.	Health Centre	s	• •	• •	• •	Φ 6	26
Section 22,	Care of Mothe	re and Vo	una Chila	tran .			
	Ante-Natal						2.0
			Evnorton	e and M		1	26
	Dental Trea	chool Chi	Expectan Idren	t and N			27
	Child Welfa			• •	• •	• •	29
	The Domici			ture Infa	nrs	• •	33
	Unmarried I	Mothers a	nd their (Children			36
1	Eye Treatme	ent	• •		• •	• •	37
1	Day Nurser	ies	• •		• •	• •	37
	Maternity O	utfits	• •	• •	• •		37
	Birth Contro			• •	• •	• •	37
	Deafness in	Young Ch	ildren	• •	• •	• •	38
	Welfare Foo	as	• •	• •	• •	• •	39
Section 23.	Midwifery:						
	Number of 1	Midwives	nracticina				40
	Number of (Cases atter	pracusing ided		• •	• •	$\begin{array}{c} 40 \\ 40 \end{array}$
	Confinement			63	• •	• •	41
	Notifications	received	from Mid	wives	• •	• •	42
	Inspection of	f Midwive	S		• •	• •	42
	Transport fo	r Midwive	es	• •	• •	• •	42
	Post-Gradua	te Courses				• •	43
	Houses for I	District Nu	irses and	Midwive	s	• •	$\frac{1}{43}$
S 2	TT 1.1 WY						
Section 24.	Health Visiting						
	Work during	year			• •	• •	44
	Staff establis.	hment		• •	• •	• •	45
	Training of I	Health Vis	itors		• •	• •	45
	Post-Graduat	e Courses			• •	• •	45
	Investigation					ernity	
	Hospitals		diantiana	for "()	Name of the	0: 1.1	45
	Investigation Accommod	dation App				Sick"	, ~
	Work of the l		itor	• •	• •	• •	45
	Old of the 1	LOUILII VIS	1101	• •	• •	• •	46
Section 25.	Home Nursing	• •					47
	0			· •			T (

CONTENTS—continued

GENERAL PROV —continued	ISION OF HEA	LTH	SERVICES	FOR	THE A	REA:	PAGE
Section 26.	Vaccination and	Immu	nisation:				
occuon 20.	Vaccination ag	ainst S	Smallpox		• •	• •	48
	Vaccination ag	ainst I	Poliomyelitis		• •	• •	48
	Vaccination ag						49
	Immunisation					• •	50
	Protection agai			• •			5 0
	_		Jean	• •	• •		~ 1
Section 27.	Ambulance Servi	ice	• •	• •	• •	• •	51
Section 28.	Prevention of Illa	ness, C	Care and Afte	r-Car	e:		~ ^
	After-Care of					• •	56
	Convalescent I	Home	Treatment	• •		• •	56
	Diabetics					• •	56
	Health Educat	ion	• •	• •		• •	56
	Tuberculosis		• •		• •		58
	B.C.G. Vaccin	nation			• •		61
	Care and Reha						66
	Chiropody Ser		• •		• •	• •	70
							m 1
Section 29.	Domestic Help S	Service	• •	• •	• •	• •	71
	Act, 1959: Ment				• •	• •	73
	Births			• •	• •	• •	76
	Nursing Homes		• •		• •	• •	76
· ·							
	tance Act, 1948:						77
	nes		• •	• •	• •	• •	80
	heels Service	• •		• •	• •	• •	81
Blind Person		• •	• •	• •	• •	• •	
Handicappe	d Persons	• •	• •	• •	• •	• •	84
	• •	• •	• •		• •	• •	84
Nurseries and	Child Minders Re	egulati	ons Act, 1948	3	• •	• •	84
Notifications o	f Infectious Disea	ses	• •		• •	• •	85
SANITARY CIRC	CUMSTANCES	OF '	THE AREA	:			
							87
Water Supply	1. 1.0	Λ	1044 106	1	• •	• •	89
Rural Water S	upplies and Sewer	rage A	Cts, 1944-190		• •	• •	90
Sewerage_and	Sewage Disposal	• •	• •	• •	• •	• •	92
Sanitary Inspe	ction		• •	• •	• •	• •	93
Closet Accomr		• •	• •	• •	• •	• •	94
Public Cleansi	ng	• •	• •	• •	• •	• •	94
Complaints	•••	• •		• •	• •	• •	
	and Control of D	evelop	ment Act, 19	60	• •	• •	95
Shops Act, 198		• •	¢ •	• •	• •	• •	95
Swimming Bat	ths and Pools		• •	• •	• •	• •	95
Food Hygiene	Regulations, 1955	5	• •	• •	• •	• •	95
Pet Animals A	ct. 1951		• •		• •		97
Rag Flock and	Other Filling Ma	aterials	Order, 1951		• •		97
Clean Air Act.	, 1956	• •	• •			• •	97
	ent Act, 1960					• •	97
							98
HOUSING	• •	• •	• •	• •	• •	• •	98
INSPECTION A	ND SUPERVIS	ION	OF FOOD:				
							101
Biological Mill	k Sampling		Tasting of C	ottle	• •	• •	101
	inations and Tube				• •	• •	101
	ilk Plants	• •	• •	• •	• •	• •	102
Milk Supplies	to Schools		• •	• •	• •	• •	
	ies Regulations, 1	949	• •	• •	• •	• •	104
Ice Cream		• •	• •	• •	• •	• •	105
Meat Inspection		• •	• •	• •	• •	• •	106
Food and Dru			• •	• •	• •	• •	108
TATTATA				-			113
INDEX	• •	• •	• •	• •	• •	• •	110

COUNTY HEALTH DEPARTMENT, 17 FRIAR LANE, LEICESTER,

October 1964

Mr. CHAIRMAN, LADIES and GENTLEMEN,

I have the honour to present my Annual Report on the work of the County Health and Welfare Department during the year 1963. The usual statistics are presented and are on the whole satisfactory. It will be noticed that there is an increase in the number of cases of pulmonary tuberculosis notified. This increase is very small but represents the reversal of a trend very noticeable in the past few years and the possible reasons are discussed in the report; while there is no cause for undue alarm this is a warning against the relaxation of our efforts, hitherto so successful, in dealing with what, not so many years ago, was one of the major health problems in the country.

Last year saw the production of the Hospital Ten-Year Plan and the Development Plan for our own health and welfare services. It is already clear that the annual revision of those Plans will entail considerable alterations both in the programmes and the rate at which they will be carried out. We can say, however, that as a result of the work put into the preparation of our Plan and the discussions which it created, we can set about preparation for the future with much more confidence than would otherwise have been possible. Alterations are not only inevitable but indeed desirable. This is a time when social changes and medical advances make it absolutely essential that we keep our services constantly under review. Some activities may become less essential as the problems which they were designed to meet alter or even disappear, while new problems arise which may involve the complete re-organisation of the existing services. The work of the health visitor can be taken as an example; she was brought into being to deal with the problems of poor standards of infant care and high infant mortality, and the sensational improvement in this field is due to a considerable extent to her efforts although, of course, many other factors—improved standards of living, better education and advances in medical care—played a part. There is still need for this work to continue but her duties now cover the entire age span of the population and she has a special place as the medical-social worker for the entire family. In this connection the closest possible association with the general practitioner is obviously essential and various developments in this direction are taking place.

This is the last complete year in which the work of the Special Case Workers for Problem Families was carried out from this Department under the direction of Dr. Campbell, the Senior Medical Officer. I should like to take the opportunity of saying that the degree of success achieved in this difficult and often disheartening work has been beyond all expectations and to pay a tribute to the Case Workers and to Dr. Campbell for all that they have done.

Difficulty in recruitment of trained staff has unfortunately continued during this year, with resulting pressure on existing staff. This is particularly noticeable in the case of midwives and home nurses where any additional burden such as illness makes the position very difficult indeed.

It is with great regret that I have to report that Mrs. A. L. E. Hamer, the County Home Help Organiser, took seriously ill during the year and died in April, 1964. To a very great extent the success of the Home Help Service, of which the Council was justly proud, was due to her energy and ability.

Many members of the Department's staff have had a hand in the preparation of this report and I am glad to be able to express my gratitude to them and to all members of the staff for their work during the year. We could not carry out our task without the co-operation of many organisations—hospital authorities, the Executive Council, and voluntary bodies of many types. This co-operation is most freely obtained, and we are grateful for all the help given us, and also for the assistance of Chief Officers of other County Departments and their staffs. I should also like to record my appreciation of the support of the members of the Health and Welfare Committee, and the way in which they respond to the demands we make on their time and energy.

I have the honour to remain,
Your obedient servant,
G. H. GIBSON,

County Medical Officer

HEALTH AND WELFARE COMMITTEE

(at 1.12.63)

HARVEY, L. W. (Chairman)

BRANSTON, T. A. S. CRISP, R. L. D. EADY, Mrs. N. M. E. EGGINGTON, A. T. GALLAGHER, M. GLOVER, R. H. E. HART, A. HEAP, J. L. HILTON, A. G., D.L. (ex-officio) HOLMES, J. H. HULL, L. W. ILIFFE, J. H.

KEAY, Mrs. M. E., B.E.M. LLOYD, Col. P. H., T.D., D.L. (ex-officio) MAWBY, G. H. MORRISON, Miss M. F. C. S. MURPHY, R. SCOTT, A. F. SHAW, J. J. H. SHEFFIELD, Mrs. D. M. SHERRIFF, J. E. TANDY, E. W. TOMPKINS, J. G. S. WESTON, R. C. YATES, F. (Vice-Chairman)

Members co-opted to the Health and Welfare Committee by the County Council on the nomination of various bodies:

NAME:

JOHNSON, Mrs. B.

REPRESENTATION:

MARTIN, Hon. Lady ABBOTT, Miss M.

Leicestershire County Nursing Association Leicestershire County Nursing Association

HURWOOD, Dr. D. S. .. National Health Service (Leicestershire and Rutland) Executive Council

TUGWELL, A. ..

.. Leicestershire and Rutland Association of Urban Authorities

SEVILLE, H. A...

.. Leicestershire and Rutland Association of Rural District Councils

Members co-opted to the General Purposes Sub-Committee:

FACER, Miss L.

.. Leicestershire Voluntary Association for Cripples' Welfare MILLER, Miss I. H. . . Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind.

Members co-opted to the County Homes Sub-Committee:

ARIS, W.

ERRINGTON, H. Y.

Members co-opted to the Mental Health Sub-Committee:

MACGREGOR, Dr. D. F. .. VALENTINE, Dr. A. A. ...

Medical Superintendent, Carlton Hayes Hospital Medical Superintendent, Glenfrith Hospital

Sub-Committees of the Health Committee

(including terms of reference)

General Purposes Sub-Committee:

HARVEY, L. W. (Chairman)

Ambulance Service Chiropody Service Health Centres Health Education Home Safety

Housing (including housing of rural workers)

Milk and Dairies

YATES, F. (Vice-Chairman)

Registration of Nursing Homes

Sewerage and water Small dwellings

Welfare of the blind, crippled, deaf and handicapped persons

General matters not specifically referred to any other Sub-Committee

HEALTH AND WELFARE COMMITTEE—continued

Domiciliary Services Sub-Committee:

YATES, F. (Chairman)

EADY, Mrs. N. M. E. (Vice-Chairman)

Convalescent Home Treatment Deafness in Young Children Domestic Help Service Health Visiting

Home Nursing

Maternity and Child Welfare

Midwifery

Nurseries and Child Minders

Other types of illness, including venereal disease, care of epileptics and care of patients discharged from hospital

Provision of nursing equipment and apparatus

Tuberculosis, including the provision of village settlements, workshops, hospital accommodation, night sanatoria, domiciliary visits to tuberculosis patients, provision of shelters and the setting up of a Care Committee

Unmarried Mothers

Vaccination and Immunisation

Welfare Foods

County Homes Sub-Committee:

HOLMES, J. H. (Chairman)

Problem Families

SHEFFIELD, Mrs. D. M. (Vice-Chairman)

All matters relating to the provision of residential accommodation for the aged and infirm, and temporary accommodation for persons in need thereof: the temporary protection of property of persons admitted to any hospital or old peoples' homes: the burial and cremation of the dead and the powers and duties of the County Council under Section 31 of the National Assistance Act, 1948, and the registration, etc., of disabled persons' and old persons' homes.

Mental Health Sub-Committee:

SHEFFIELD, Mrs. D. M. (Chairman)

MURPHY, R. (Vice-Chairman)

All matters relating to mental health, including the Council's duties in respect of mental illness under Section 28 of the National Health Service Act, 1946; the Council's duties under the Mental Health Act, 1959; staffing and financial matters appertaining to this Sub-Committee.

Representation on other Governing Bodies and Associations

Joint Consultative Committee for the Welfare of the Blind:

GALLAGHER, M., HARVEY, L. W., HOLMES, J. H., MAWBY, G. H.

Leicestershire County Nursing Association:

EADY, Mrs. N. M. E., HOLMES, J. H., MORRISON, Miss M. F. C. S., SHERRIFF, J. E.

National Health Service Act, 1946; Leicestershire and Rutland Executive Council:

HARVEY, L. W. ARIS, W. EADY, Mrs. N. M. E. HEAP, J. L.

SHAW, J. J. H. WESTON, R. C.

Leicestershire Voluntary Association for Cripples' Welfare:

EADY, Mrs. N. M. E., KEAY, Mrs. M. E., B.E.M., SHEFFIELD, Mrs. D. M.

Leicester and County Mission to the Deaf:

KEAY, Mrs. M. E., B.E.M.

HEALTH AND WELFARE COMMITTEE—continued

Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind: GALLAGHER, M. SEVILLE, H. A. SHERRIFF, J. E. YATES, F.

Wycliffe Society for Helping the Blind:

KEAY, Mrs. M. E., B.E.M.

WESTON, R. C.

Southern Regional Association for the Blind:

YATES, F.

Friends of Markfield After-Care Committee:

MURPHY, R.

WESTON, R. C.

Leicestershire Rural Community Council:

HART, A.

YATES, F.

East Midlands Old People's Welfare Committee of the National Council of Social Services:

JOHNSON, Mrs. B.

Leicestershire Old People's Welfare Association:

ARIS, W.

SHAW, J. J. H.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

County Medical Officer; Principal School Medical Officer: GIBSON, G. H., M.B., CH.B., D.P.H.

Deputy County Medical Officer; Deputy Principal School Medical Officer: BYARS, J. R., M.B., CH.B., D.P.H.

Senior Medical Officers:

CAMPBELL, MARJORIE L., M.B., B.CH., B.A.O., D.P.H. BRANNEN, I. C., M.B., CH.B., M.R.C.P.E., D.P.H. (resigned 15.9.63) SARGINSON, J., M.B., B.S., D.P.H. (appointed 30.9.63)

Assistant County Medical Officers:
BENNETT, JOAN G. H., M.B., B.CH., B.A.O.
PROSSER-ASHBY, G., M.B., B.S., B.A.O., D.C.H.

Senior Assistant County Medical Officer;
Medical Officer of Health, Loughborough M.B.:
HOLDERNESS, R. C., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Assistant County Medical Officer; Medical Officer of Health, Blaby and Lutterworth
Rural Districts:

ROSS, A. C., M.B., CH.B., D.P.H.

Assistant County Medical Officer;
Medical Officer of Health, Barrow-upon-Soar Rural District:
HALL, J. W., M.D., B.S., B.Hy., D.P.H.

Assistant County Medical Officer; Medical Officer of Health, Oadby, Wigston and Market Harborough Urban Districts and Market Harborough Rural District:

KIND, R. W., M.R.C.S., L.R.C.P., D.P.H.

Assistant County Medical Officer:

Medical Officer of Health, Hinckley Urban District and Market Bosworth Rural

District:

KERSHAW, J. B., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Chief Physician and Chief Tuberculosis Officer:

BROUGH, M. C., M.D., B.CH., B.A.O.

(Joint duties with Sheffield Regional Hospital Board and County Council)

Principal School Dental Surgeon: CAMPBELL, W. G., L.D.S.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

—continued

School Dental Surgeons:

LATIMER, R., L.D.S. (part-time) MURRAY, L., L.D.S. (appointed 1.2.63) CASWELL, Miss J., L.D.S. (appointed 2.9.63)

County Health Inspector:
GREGORY, S. A., F.R.S.H., M.A.P.H.I.

Assistant County Health Inspector: BUTTON, D. D., M.A.P.H.I., A.R.S.H.

Superintendent Health Visitor and School Nurse (combined duties): HORNSBY, Miss A., R.G.N., S.C.M., H.V.CERT.

Deputy Superintendent Health Visitor and School Nurse (combined duties): TAYLOR, Miss R. P., S.R.N., S.C.M., H.V.CERT. (resigned 30.11.63)

Health Visitors and School Nurses (combined duties):

ALDERTON, Miss M. B. ANDERSON, Miss J. A. BAINES, Mrs. D. G. BAXTER, Miss D. G. (Diabetic H.V.) BLACK, Miss E. J. BOON, Miss K. F. BOWMER, Miss A. N. CARTER, Miss W. D. COULSON, Mrs. G. E. DANIELS, Miss J. DENNING, Miss D. M. DIBLE, Miss H. DOHERTY, Miss E. M. DOWNES, Miss D. I. (resigned 3.5.63) DUNNE, Mrs. B. DYSON, Miss J. M. (Health Education H.V.) FARMER, Mrs. D. FOINETTE, Mrs. N. FOXLEY, Miss E. M. GARRETT, Mrs. N. I. GRATELEY, Mrs. S. T. HENSON, Miss F. B. (resigned 16.4.63) HOLMES, Miss A. L. HUDSON, Mrs. B. JARVIS, Miss M. JONES, Mrs. K. B.

KEITH, Miss L. KERRY, Mrs. E. (part-time) KLEIN, Mrs. D. M. I. LANCASTER, Miss A. H. McDONAGH, Miss K. McILRATH, Miss G. MOULD, Miss L. M. NUTTING, Miss M. PATERSON, Miss M. J. PEARCE, Miss S. M. PEARSONS, Mrs. O. (appointed 22.7.63) PHILIP, Miss M. E. ROBERTSON, Miss A. M. (resigned 12.6.63) ROBINSON, Miss E. RODDIS, Miss M. J. RUNSWICK, Mrs. H. (Health Education H.V.) SAGE, Miss R. E. SARGEAUNT, Mrs. B. Z. SIMMS, Miss A. E. SIMMONS, Miss B. W. SMITH, Miss E. F. V. SWINGLER, Miss M. E. WHYTOCK, Mrs. R. M. WAINWRIGHT, Mrs. A. (appointed 22.7.63)

STAFF OF THE PUBLIC HEALTH DEPARTMENT

—continued

Social Worker: NAYLOR, P. W.

Occupational Therapists:

HARDING, Miss J. (resigned 2.8.63) GODWIN, Miss K. (appointed 15.7.63) WRIGHT, Miss M. (appointed 2.9.63)

WILLIAMS, Mrs. E. M.—Welfare Assistant (appointed 29.4.63)

Non-Medical Supervisor of Midwives:

ALLINSON, Miss L., S.R.N., S.C.M., H.V.CERT. (on the Staff of the Leicestershire County Nursing Association)

Domestic Help Organiser: HAMER, Mrs. A. L. E., M.B.E.

Ambulance Officer: DIXON, S. S.

Deputy Ambulance Officer: CLARKE, A. S.

Principal Mental Welfare Officer: FORDHAM, W. J.

Senior Mental Welfare Officers: NEWTON, Mrs. M., D.P.A.; WEST, Miss D. I.; WINSTANLEY, J.

Mental Welfare Officers:

CHRISTIAN, Miss G. H.
CLARKE, P. (appointed 1.10.63)
PUGH, Miss J. S. (appointed 1.10.63)
FAIRBROTHER, Mrs. D. (appointed 1.11.63)
SIMMONS, P. (appointed 1.11.63)

Training Centres Organiser: BUSHELL, R. S.

Special Case Workers:
VOLANS, Mrs. I. SULLIVAN, G. SPONTON, T. H.

Principal Administrative Assistant: READ, E. F.

Senior Administrative Officer (County Homes): FREER, N. C.

Welfare Officer (County Homes): E. WILLEY

Resident Officers at County Homes:

Catherine Dalley House, Scalford Road, Melton Matron, Miss C. Sutton Mowbray

Enderby House, Leicester Road, Narborough..

Secretary, Mr. H. S. Painter Matron, Mrs. M. G. Painter Matron, Miss E. F. F. Blence

Hastings House, 59a Regent Street, Lough- Matron, Miss E. F. F. Blencowe borough

Knighton House, 341 London Road, Leicester

Matron, Miss F. E. Holland Matron, Miss W. M. Wheeler Secretary, Mr. L. R. Wood

Moat House, New Road, Burbage St. Luke's, Leicester Road, Market Harborough

Matron, Mrs. M. J. Wood

STAFF OF THE PUBLIC HEALTH DEPARTMENT

—continued

West Haven, Station Road, Market Bosworth, Secretary, Mr. A. D. Allen Matron, Mrs. M. E. Allen Woodmarket House, Lutterworth, Rugby . . Secretary, Mr. D. H. K. Gilson Matron, Mrs. G. M. Gilson Loudoun House, Ridgway Road, Ashby-de-la- Matron, Mrs. M. C. C. Silverwood

Zouch

Tillson House, Bradgate Drive, Coalville ... Matron, Miss R. Reid
Lenthall House, Market Harborough ... Matron, Mrs. E. M. Bullivant
(Operative from November, 1963)

Officers at Training Centres:

Coalville Adult Training Centre, Stephenson Manager, Mr. G. Taylor House, Ashby Road, Coalville

Desford Adult Training Centre, Peckleton Lane, Manager, Mr. J. A. Porter

Desford
Coalville Junior Training Centre, c/o St. John Supervisor, Miss J. Meadows
Ambulance H.Q., Forest Road, Coalville

Dorothy Goodman Training Centre, Middlefield Supervisor, Mrs. M. E. Knight Lane, Hinckley

Loughborough Training Centre, Ashmount, Supervisor, Mrs. K. M. West Bridge Street, Loughborough

Melton Mowbray Training Centre, Trades and Supervisor, Mrs. R. M. Baker Labour Hall, Park Lane, Melton Mowbray

Wigston Training Centre, Birkett House, Supervisor, Mrs. J. L. East Central Avenue, Wigston Magna

DISTRICT MEDICAL OFFICERS OF HEALTH

	or real	
Area URBAN:	Name	Office Address and Telephone No.
Ashby-de-la-Zouch	Dr. A. M. W. Segerdal	Council Offices, Kilwardby Street, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 2853)
Ashby Woulds	Dr. A. M. W. Segerdal	Council Offices, Moira (Tel. Swadlincote 7474)
Coalville	Dr. A. Hamilton	Council Offices, London Road, Coalville (Tel. Coalville 2283)
Hinckley	Dr. J. B. Kershaw	Council Offices, Station Road, Hinckley (Tel. Hinckley 3771)
Loughborough	Dr. R. C. Holderness .	Health Department, Town Hall, Loughborough (Tel. Loughborough 2094)
Market Harborough	Dr. R. W. Kind	. Council Offices, Northampton Road, Market Harborough (Tel. Market Harborough 2258)
Melton Mowbray	Dr. J. Young	Egerton Lodge, Melton Mowbray (Tel. Melton Mowbray 3662)
Oadby	Dr. R. W. Kind	Council Offices, Oadby (Tel. Oadby 3266)
Shepshed	Dr. A. M. W. Segerdal.	. Council Offices, Shepshed (Tel. Shepshed 3212)
Wigston	Dr. R. W. Kind	. Council Offices, Wigston (Tel. Wigston 2345)
RURAL:		
Ashby-de-la-Zouch	Dr. A. M. W. Segerdal.	. South Street, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 2783)
Barrow-upon-Soar	Dr. J. W. Hall	. Council Offices, 31 Fowke Street, Rothley (Tel. Rothley 2391)
Billesdon	Dr. J. Young	. Council Offices, Thurnby (Tel. Thurnby 2182)
Blaby	Dr. A. C. Ross	. Council Offices, Narborough (Tel. Narborough 2071)
Castle Donington	Dr. T. M. Montford	4 Clapgun Street, Castle Donington (Tel. Castle Donington 271)
Lutterworth	Dr. A. C. Ross	Council Offices, Lutterworth (Tel. Lutterworth 61 and 164)
Market Bosworth	Dr. J. B. Kershaw	Council Offices, Market Bosworth (Tel. Market Bosworth 234, 371)
Market Harborough	Dr. R. W. Kind	42 High Street, Market Harborough (Tel. Market Harborough 2063)
Melton and Belvoir	Dr. J. Young	Warwick Lodge, Melton Mowbray (Tel. Melton Mowbray 3343)

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

NATURAL AND SOCIAL CONDITIONS

With an administrative area of 806 square miles, the County of Leicester lies geographically in the centre of England. Its extreme length north to south is 44 miles and from east to west 39 miles. The undulating surface of the County varies in height from 100 to 912 feet above sea level.

Traditional industries, such as farming, coal-mining and engineering, which were originally associated with the hosiery and footwear industries, are now very diversified and include the manufacture of machine tools, scientific instruments, electronic equipment and road-making machinery.

There are over 1,900 miles of road within the County and the M1 Motorway is being extended through Leicestershire.

STATISTICS OF THE AREA

A		** 1	70.010		Whole County
(Census in 1961)	• •	Rural	56,910 458,492	• •	515,402
Area in Acres Urban 56,910					
		Urban	192,000		
-1			234,490	• •	
_			• •		£14,411,184
Estimated product of penn	ıy rate, l	963-64	• •		£61,309
Live births		Urban	3,573		
		Rural	4,391		7,964
		Urban			
		Rural	18.72		18.67
as a percentage of total liv	e births				
			, 0	• •	3.69%
Stillbirths	• •				7.40
0					142
					1 = 20
		Rural	19.87	• •	17.52
Total live and stillbirths	• •		,		
		Rural	4,480		8,106
Infant mortality (deaths u	ınder				
one year of age)	• •				104
T C	,	Rural	73	• •	134
Infant mortality rate	(per	TT 1	15 05		
thousand live births)	• •	Urban Rural	$\begin{array}{c} 17.07 \\ 16.62 \end{array}$		16 00
Legitimate Infant Mortalit		Rurai	10.02	• •	16.82
(per thousand legitimate					
births)	··	Urban	16.93		
		Rural	15.79		16.30
					* 0, 00

STATISTICS OF THE AREA—continued

Illegitimate Infant Mortality rate (per thousand illegitimate live				
births)	Urban Rural	$20.41 \\ 40.82$	• •	30.61
Neo-natal mortality (deaths				
under four weeks of age)	Urban Rural	46 56		102
Neo-natal mortality rate (per				
thousand live births)	Urban Rural	$12.87 \\ 12.75$	• •	12.81
Early Neo-natal mortality (deaths				
under one week)	Urban	$\frac{42}{50}$		0.0
To the DT and the state of the	Rural	50	• •	92
Early Neo-natal mortality rate (per thousand live births)	Urban	11.75		
(per thousand five offths)	Rural	11.39		11.55
Perinatal mortality (stillbirths				
and deaths under one week)	Urban	95		
	Rural	139	• •	234
Perinatal mortality rate (per	T Inlance	96 90		
thousand live and stillbirths)	Urban Rural	$\begin{array}{c} 26.20 \\ 31.03 \end{array}$		28.87
Maternal mortality	Urban	1	• •	20.07
Tracella Moleutey	Rural	_	• •	1
Maternal mortality rate (per				
thousand live and stillbirths)	Urban	0.27		
	Rural		• •	0.12
Deaths	Urban Rural	2,017		4 400
Darth arts	Urban	2,405 10.50	• •	4,422
Death-rate	Rural	10.30 10.27		10.37
	T.COT ON	20.20	• •	10.07

POPULATION OF THE COUNTY

The Registrar-General's estimate at mid-year 1963 is given below, together with that of 1962.

						Estimated	Estimated
						Mid-year	Mid-year
U	rban Distri	icts:				1963	1962
	Ashby-de-	la-Zouch	• •	• •	• •	7,560	7,480
	Ashby Wo	ulds	• •	• •	• •	3,370	3,370
	Coalville	• •	• •	• •		26,840	26,510
	Hinckley	• •	• •	• •		42,000	41,840
	Loughboro	ough M.B.	• •	• •		38,990	38,730
	Market Ha	arborough	• •	• •		12,020	11,800
	Melton M	owbray	• •	• •	• •	16,310	15,980
	Oadby	• •	• •	• •	• •	14,050	13,510
	Shepshed	• •	• •	• •	• •	7,420	7,310
	Wigston	• •	• •	• •	• •	23,440	22,990
	7	Total Urban	Districts	• •	• •	192,000	189,520
							-

POPULATION OF THE COUNTY—continued

				Estimated Mid-year	Estimated Mid-year
Rural Districts:				1963	1962
Ashby-de-la-Zouch	• •	• •	• •	13,680	13,660
Barrow-upon-Soar	• •	• •	• •	60,200	58,570
Billesdon	• •	• •	• •	20,810	19,740
Blaby	• •	• •	• •	60,380	58,490
Castle Donington	• •	• •	• •	10,040	10,000
Lutterworth	• •	• •	• •	13,060	13,350
Market Bosworth	• •	• •	• •	28,240	27,780
Market Harborough	• •	• •	5 6	9,310	9,260
Melton and Belvoir	• •	• •	• •	18,770	18,660
Total Rura	l Distri	cts	• •	234,490	229,510
Total population of who	ole cour	nty	• •	426,490	419,030

The following table gives the population figures for the past 20 years.

Year	Urban Population	Rural Population	Whole County Population
1944	146,320	164,060	310,380
1945	145,100	162,590	307,690
1946	150,930	168,100	319,030
1947	154,450	172,880	327,300
1948	158,960	178,840	337,800
1949	160,490	181,710	342,200
1950	163,780	183,900	347,680
1951	162,700	184,800	347,500
1952	162,100	186,600	348,700
1953	163,500	188,000	351,500
1954	164,970	189,630	354,600
1955	166,600	191,900	358,500
1956	168,300	196,300	364,600
1957	171,100	202,200	373,300
1958	174,200	207,200	381,400
1959	176,600	212,900	389,500
1960	179,630	218,690	398,320
1961	186,150	224,620	410,770
1962	189,520	229,510	419,030
1963	192,000	234, 490	426,490

LIVE BIRTHS

(rates calculated per thousand population)

A small increase has been recorded in the number of births recorded in the County, from 7,903 to 7,964, resulting in a birth-rate decrease of 0.2 to 18.7. The rate for England and Wales was 18.2. There were 4,120 male and 3,844 female births during 1963; a rate of 104.4 male to 100 female births.

There was a decrease in the number of illegitimate live births; from 299 to 294, resulting in a decrease in the rate from 0.71 to 0.69.

The number of births and the birth-rate for the past 20 years is given below.

	Ur	ban	Rural		Whole	Rate for	
Year	No.	Rate	No.	Rate	No.	Rate	England and Wales
1944	3,120	21.3	3,416	20.8	6,536	21.1	17.6
1945	2,859	19.7	2,924	18.0	5,783	18.8	16.1
1946	3,222	21.4	3,341	19.9	6,563	20.6	19.1
1947	3,366	21.8	3,582	20.7	6,948	21.2	20.5
1948	3,050	19.2	3,313	18.5	6,363	18.8	17.9
1949	2,867	17.9	3,069	16.9	5,936	17.4	16.7
1950	2,675	16.3	2,949	16.0	5,624	16.2	15.8
1951	2,645	16.3	2,922	15.8	5,567	16.0	15.5
1952	2,607	16.1	2,856	15.3	5,463	15.7	15.3
1953	2,602	15.9	2,820	14.9	5,422	15.4	15.5
1954	2,465	14.9	2,680	14.1	5,145	14.5	15.2
1955	2,538	15.2	2,759	14.4	5,297	14.8	15.0
1956	2,600	15.5	3,011	15.3	5,611	15.4	15.7
1957	2,789	16.3	3,366	16.7	6,155	16.5	16.1
1958	2,912	16.7	3,459	16.7	6,371	16.7	16.4
1959	2,989	16.9	3,798	17.8	6,787	17.4	16.5
1960	3,156	17.6	3,920	17.9	7,076	17.8	17.1
1961	3,420	18.4	4,086	18.2	7,506	18.3	17.4
1962	3,507	18.5	4,396	18.2	7,903	18.9	18.0
1963	3,573	18.6	4,391	18.7	7,964	18.7	18.2

STILLBIRTHS

(rates calculated per thousand live and stillbirths)

The number of stillbirths, 142, is 6 more than in 1962. The stillbirth rate, 17.5 is 0.6 higher than in 1962; the comparative rate for England and Wales is 17.3. Once again a total of eight illegitimate stillbirths were recorded.

		Legiti	imate	Illegi	timate	Total		
	Year		No.	Rate	No.	Rate	No.	Rate
1944			155	23.1	22	3.3	177	26.4
1945			153	25 .6	17	2.9	170	28.5
1946			151	22.5	7	1.0	158	23.5
1947	• •		172	24.1	10	1.4	182	25.5
1948	• •		150	23.0	7	1.1	157	24.1
1949	• •		127	20.9	12	2.0	139	22.9
1950			155	26.8	5	0.9	160	27.7
1951			121	21.2	7	1.2	128	22.4
1952			113	20.2	5	0.9	118	21.1
1953	• •		120	21.6	3	0.5	123	22.1
1954	• (139	26.2	10	1.9	149	28.1
1955			108	19.9	5	0.9	113	20.8
1956	• •		142	24.6	6	1.0	148	25.6
1957	• •		121	19.7	7	1.1	128	20.8
1958	• •		156	23.9	9	1.4	165	25.3
1959			146	21.0	8	1.2	154	22.2
1960	• •		122	16.9	8	1.1	130	18.0
1961			142	18.5	8	1.0	150	19.6
1962			128	15.9	8	1.0	136	16.9
1963	• •		134	16.5	8	1.0	142	17.5
1303	• •	• •	104	10.0	8	1.0	142	17.

NEO-NATAL DEATHS

(rates calculated per thousand live births)

The early neo-natal death rate rose during 1963. There were 14 more neo-natal deaths in 1963 than in the previous year and the rate increased by 1.6 over the same period.

EARLY NEO-NATAL DEATHS

	Urban		Ru	Rural		Whole County	
Year	No.	Rate	No.	Rate	No.	Rate	
1961 1962 1963	36 46 42	10.5 13.1 11.7	41 32 50	10.0 7.3 11.4	77 78 92	10.3 9.9 11.5	

NEO-NATAL DEATHS

			Urb	oan	Ru	ral	Whole County		
	Year		No.	Rate	No.	Rate	No.	Rate	
1952	• •		57	21.9	54	18.9	111	20.3	
1953			53	20.4	48	17.0	101	18.6	
1954			57	23.9	49	18.9	106	21.3	
1955			43	16.9	34	12.3	77	14.5	
1956			52	20.0	40	13.2	92	16.4	
1957	• •	• •	5 3	19.0	5 5	16.3	108	17.4	
1958	• •		30	10.3	40	11.6	70	11.0	
1959	• •		40	13.4	47	$12 \cdot 4$	87	12.8	
1960			47	14.3	40	$10 \cdot 2$	87	12.3	
1961	• •		40	11.7	46	11.3	86	11.5	
1962			58	16.5	38	8.6	96	12 2	
1963	• •		46	12.9	56	12.7	102	12.8	

INFANT MORTALITY

(rates calculated per thousand live births)

	Url	oan	Ru	ral	Whole	Rate for England and	
Year	No.	Rate	No.	Rate	No.	Rate	Wales
1944	123	39	122	36	245	37	46
1945	97	34	1 10	38	207	36	46
1946	134	42	101	30	235	36	43
1947	161	48	137	38	298	43	41
1948	102	33	103	31	205	32	34
1949	81	28	80	26	161	27	32
1950	80	29.9	72	24.4	152	27.0	29.8
1951	72	27.2	71	24.3	143	25.7	29.6
1952	77	29.6	68	23.8	145	26.5	27.6
1953	77	29.6	75	26.6	152	28.0	26.8
1954	70	29.4	70	27.0	140	28.1	25.4
1955	65	25.6	54	19.6	119	22.5	24.9
1956	65	25.0	65	21.6	130	23.2	23.8
1957	71	25.5	76	22.6	147	23.9	23.1
1958	51	17.5	59	17.1	110	17.3	22.5
1959	52	17.4	70	18.4	122	18.0	22.2
1960	76	24.1	61	15.6	137	19.4	21.9
1961	59	17.3	59	14.4	118	15.7	21.4
1962	79	22.5	57	13.0	136	17.2	21.6
1963	61	17.1	73	16.6	134	16.8	20.9

The following table gives the number and percentage of deaths in the age groups under one week, one to four weeks, and four weeks to one year for the last three years.

	Deaths one v		Deaths four v			s four one year
Year	No.	%	No.	%	No.	%
1961	77	65.3	9	7.6	32	27.1
1962	78	57.3	18	13.2	40	29.4
1963	92	68.6	10	7.5	32	23.9

INFANT MORTALITY

The following table analyses into individual causes the 134 infant deaths which occurred in 1963, compared with the figures for 1962.

		Y	ear l	1962	Y	ear 1	963
Cause of death		M.	F.	Total	M.	F.	Total
Motor Vehicle Accidents		1		1	_	_	_
Leukaemia and aleukaemia		_	_	_	_	1	1
Pneumonia		13	2	15	6	8	14
Bronchitis		4	2	6	2	4	6
Other diseases of respiratory system		1	1	2	~ 1	1	2
Gasteritis enteritis and diarrhoea		1	1	2	_	1	1
Nephritis and nephrosis		_	_	_	_	1	1
Congenital malformation		23	16	39	13	9	22
Other defined and ill-defined diseases	• •	47	18	65	37	44	81
All other accidents	• •	6	_	6	1	5	6
Totals		96	40	136	60	74	134

As the group "other defined and ill-defined diseases" accounts for approximately half the total deaths it has been broken down into the following sub-divisions:

Intracranial and spinal i	njury at	birth :		1962	1963
Cerebral haemorrhage				5	8
Birth injury of brain	• •	• •		2	1
Other brain haemorrhage	• •	• •	• •	1	-
Post-natal asphyxia and	atelectas	is :			
Atelectasis (all forms)		• •		7	5
Asphyxia	• •	• •	• •	4	3
Immaturity with or with subsidiary condition:	nout men	ation of	other		
Prematurity	• •	• •	• •	24	41
Haemolytic disease of the	e newbor	n :			
Haemolytic disease of the r			• •	_	1
Haemorrhagic disease of	the newl	oorn :			
Haemorrhagic disease of th	e newborn		• •	_	1

INFANT MORTALITY—continued

Other conditions:

		1962	1963
Acute oedema glottidis		 	1
Anaemia		 -	3
Anoxia		 -	1
Cardiac failure		 1	1
Cold syndrome	• •	 1	9464500
Cardio respiratory failure	• •	 5	1
Endocarditis		 1	Deliane.
Fibrocystic disease of pane	creas	 - manager	1
Hyaline membrane disease		 1	2
Intracranial haemorrhage		 _	2
Intraventricular haemorrha	age	 1	1
Meningitis		 4	1
Myocarditis		 1	-
Neoplasm of liver		 neren.	1
Oesophageal atresia		 _	1
Postmaturity		 -	1
Pulmonary syndrome		 _	3
Respiratory failure		 2	_
Septicaemia		 2	_
Suprarenal haemorrhage		 1	1
Uraemia		 2	-

MATERNAL MORTALITY

(rates calculated per thousand live and stillbirths)

			Number of	Rate per thousand	d live and stillbirths
	Year		maternal deaths	Leicestershire	England and Wales
1944		• •	14	2.07	1.93
1945			16	2.69	1.79
1946			6	0.89	1.43
1947			9	1.26	1.17
1948			10	1.53	0.86
1949	• •		5	0.82	0.82
1950			7	1.21	0.86
1951			5	0.88	0.79
1952			1	0.18	0.72
1953			4	0.72	0.76
1954	• •		2	0.37	0.69
1955			3	0.55	0.64
1956			4	0.69	0.56
1957			3	0.48	0.47
1958			_		0.35
1959			4	0.58	0.32
1960			3	0.42	0.39
1961			2	0.26	0.34
1962			2	0.25	0.33
1963			1	0.12	0.28*

^{*} Provisional

DEATHS (all causes and all ages)

The number of deaths from all causes was 4,422, an increase of 150 over the previous year. There were 83 more neoplasm deaths recorded in 1963. Diseases of the nervous system and sense organs accounted for 59 more deaths than in 1962 and deaths from diabetes continue to increase.

]	I. INFECTIVE AND PARASITIC DISEASES		Year 1959	Year 1960	Year 1961	Year 1962	Year 1963
	1. Tuberculosis, respiratory		18	20	20	15	11
	2. Tuberculosis, other	• •	5	2	3	2	4
	3. Syphilitic disease	• •	6	8	10	5	6
	4. Diphtheria	• •	_	_	_	_	_
	5. Whooping cough	• •	1		-	german.	_
	6. Meningococcal infections	• •	1	. Annihoraja	1	1	_
	7. Acute poliomyelitis	• •	_	1	_	_	_
		• •	1	_	2	_	_
	9. Other infective and parasitic diseases	• •	10	6	8	11	10
II.	. NEOPLASMS						
		• •	111	99	83	96	128
	11. Malignant neoplasm, lung, bronchus	• •	126	137	171	167	165
		• •	55	67	76	75	78
		• •	31	31	30	29	28
	14. Other malignant and lymphat neoplasms	ic	359	339	371	346	393
	15. Leukaemia aleukaemia	• •	24	25	19	17	21
III.	ALLERGIC, ENDOCRINE SYSTEM METABOLIC, AND NUTRITIONAL DISEASES	-					
	16. Diabetes	•	29	31	30	30	39
VI.	DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS						
	17. Vascular lesions of the nervous system	n	590	613	611	676	735
VII.	DISEASES OF THE CIRCULATORY SYSTEM	Y					
	18. Coronary disease, angina		597	642	664	684	712
	19. Hypertension with heart disease .		102	108	116	96	104
	20 Other heart disease	•	585	598	633	628	607
	21. Other circulatory disease		186	192	181	209	193
VIII.	DISEASES OF THE RESPIRATORY SYSTEM	Y					
	22. Influenza		53	11	112	16	1.0
	23. Pneumonia		139	153	180	175	16
	24. Bronchitis		162	174	196	205	190 212
	25. Other diseases of the respiratory system		32	34	44	48	49
					1.1.	10	17

											WH	OLE	СО	UNT	Y											1	AGGRI	EGATE	s		
CAUSES OF DEATH	Un 4 we	der eeks	& u	reeks inder year	1	_	5	<u> </u>	15-	_	2	5—	3	5—	4	5—	5	5—	6	5—	75	& over	Urba	an Dis	tricts	Ru	ral Dis	tricts	w	hole Co	unty
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total	M.	F.	Total	M.	F.	Tota
1. Tuberculosis, respiratory	-	_	-	-	_	-	-	_	-	_	_	_	1	_	3	_	4	_	2	_	_	1	4	_	4	6	1	7	10	1	11
2. Tuberculosis, other	-	- :	-	_	_	_	_	-	-	1	-	-	1	-	1	-	-	_	-	_	_	1	1	_	1	1	2	3	2		4
3. Syphilitic disease	_	-	-	-	-	-	-	-		_	_	_	-	-	-	_	2	2	2	1	_	_	1	2	3	3	1	3	4	_	6
4. Diphtheria	- 1	-	-	~	_		-	-	_	_	_	_	-	_	_	_		_	_	_	_	_	_	_		_	_		. *	1 -	0
5. Whooping cough	~		_		-	_	-	-		_	_	_	-	_	_ ,	_	_	_	_	_	_	_	_	_	_	l _		~		-	-
6. Meningococcal infections	_	-	_	_	_	_	-	_	_] _ ;		-	_	_	_	_	_	_	_	_	_	_	_	_	1 -	_	_	_	_	-
7. Acute poliomyelitis	_	_	_ }	_	- 1	_	-	-	_	_	_	_	_	_	_	_	_	_	_	_	_		_			1	_	_	_	-	-
8. Measles	_	_	_	_	_	_	_	_	_		_	_	l			~	_	_	_		_	_	_	1	-	_	-	_	-	_	-
9. Other infective and parasitic diseases	_	_	_	_	_	_		_			_	_	1	1	_ [1	1	1	2	1	- 2		-	3	Ī .	_	_	-	_	-
10. Malignant neoplasm, stomach	_	_	_	_	_	_	_	_			_		1	1	5	4	15	12	29	18	17	26	94	3		4	3	7	4	6	10
11. Malignant neoplasm, lung, bronchus	_	_	_	_	_	_	_ [_			2	3		20	4	51			1			34	27	61	33	34	67	67	61	128
12. Malignant neoplasm, breast	_	_	_	_	_	_	_		_	_		1	"	4	20	10	_	4	55	8	16	2	61	12	73	84	8	92	145	20	165
13. Malignant neoplasm, uterus	_		_			_	_	_				2	-		-		-	18	_	25	-	20	-	35	35	-	43	43	-	78	78
14. Other malignant & lymphatic neoplasms			_		_	_	2	2	- 1	_	-	2	8	_	-	5	-	5		9	[7	-	9	9	-	19	19	-	28	28
15. Leukæmia, aleukæmia	_	_	_	1		_	1	_	_	1	_	_		5	17	17	61	32	59	52	74	60	102	84	186	120	87	207	222	171	393
16 Dishara	_	_			_	_ ;		-	-	-	2	-	-	2	1	-	3	4	3 ·	-	2	2	3	3	6	9	6	15	12	9	21
17. Vascular lesions of nervous system	_	_]		-			-	~	-		_	_	- 1	_ [1	- 1	3	3	7	8	6	11	8	8	16	9	14	23	17	22	39
10 Canana diamana analan	- 1		_	-	-	-	-	-	-	-	1	3	4	6	12	8	30	41	87	110	173	260	149	195	344	158	233	391	307	428	735
	-	-	_	~	-	-	_		-	-	2	-	11	1	60	7	117	35	135	109	118	117	202	143	345	241	126	367	443	269	712
19. Hypertension with heart disease	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	2	7	5	18	12	23	36	22	28	50	27	27	54	49	55	104
20. Other heart disease	-	-	-	-	- [-	- 1	-	1	-	2	2	6	5	13	12	22	25	50	52	165	252	102	144	246	157	204	361	259	348	607
21. Other circulatory disease	-	-	-	-	-	-	-	-	-	-	-	1	1	-	9	5	14	7	18	21	50	67	44	57	101	48	44	92	92	101	193
22. Influenza	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	3	-	1	_	7	3	9	3	12	4	_	4	13	3	16
23. Pneumonia	2	3	4	5	2	1	~	-	1	-	-	-	1	1	2	3	10	3	33	11	54	54	43	36	79	66	45	111	109	81	190
24. Bronchitis	1	-	1	4	-	1	1	-	-	-	-	_	1	2	9	2	27	7	50	18	61	27	69	32	101	82	29	111	151	61	212
25. Other diseases of respiratory system	-	-	1	1	2	2	-	-	-	-	-	_	2	-	4	-	8	2	4	3	11	9	17	9	26	15	8	23	32	17	49
26. Ulcer of stomach and duodenum	~	-	-	-	-	-	-	-	-	-		-	-	-	3	-	3	2	8	2	8	_	7	3	10	15	1	16	22	4	26
27. Gastritis, enteritis and diarrhœa	-	-	-	1	-	1	-	-	-	-	-	-		- 1	-	1	1	2	2	2	2	- 6	2	4	6	3	9	12	5	13	18
28. Nephritis and nephrosis	-	-	-	1	-	-	-	-	1	-	1	-	2	1	2	1	2	1	4	4	5	7	11	9	20	6	6	12	17	15	32
29. Hyperplasia of prostate	-	-	-	-	-	- 1	-	-	_	_	-	_	_	_	_	_	1	_	6	_	7		9	_	9	5	0	5	17	i	
30. Pregnancy, childbirth, abortion	-	-	-	-	-	- 1	-	-	_	_	_	I	_	_	_	_		_	_	_			9	1	1	_	-	D	- 1	-	14
31. Congenital malformation	11	7	2	2	3	1	_	_	_	_	_]	1	_	1	1	2	1	_	1	_	_	_	9	4	13	10	-	_	-	1	1
32. Other defined and ill-defined diseases	36	41	1	3	1	2	3	_	1	1	7	6	4	9	8	14	22	25	26	28	70	83		1			10	20	19	14	33
33. Motor vehicle accidents	-	~	-	_	2	_ }	3	_	17	I	10	2	3	ĭ	5	3	4	5	3	6	2	83	78	97	175	101	115	216	179	212	391
34. All other accidents	_	1	1	4	4	_	2	_	4	1	2	1	4	1	2	1	10	4				1	16	6	22	33	14	47	49	20	69
35. Suicide	~	_	-	_	_3	_		_	1	_	2	4	3	1	4	2	7		8	4	12	30	23	23	46	26	24	50	49	47	96
36. Homicide and operations of war	-	-	-	_	1	_	1	2	_	1	-	-	~	1	4	-		1	4	3	1	1	9	4	13	13	8	21	22	12	34
TOTALO									_															1	1		4	6	2	5	7
TOTALS	50	52	10	22	15	8	13	4	27	6	29	28	59	43	183	103	429	246	616	508	885	1,086	1.035	982	2.017	1.281	1 124	2 405	2 316	2,106	4 499



Causes of Death in Administrative Areas, 1963

CAUSES OF DEATH	Ashb la-Zo U.	ouch	Asi Wo U.			alville I.D.	Hin U	ickley I.D.	Lou bord M.	ough	H: bore	irket ar- ough .D.	Mov	elton wbray '.D.	Oa U	dby .D.	She	pshed .D.	Wig	gston .D.	Ashb la-Z R.		Barr upon R.	Soar	Billes R,I		Bla R.I	by D.	Cast Donin R.D	gton	Lutter worth R.D.		Market osworti R.D.	h bo	larket Har- rough R.D.	Be	ton & lvoir D.		otals .D.'s		otals D.'s	Totals Whole
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	M.	F.	M. 1	7. N	. F.	_	F.	_	F.	ł	F.	M.	F.	County
All causes	42	36	17	16	160	135	214	218	235	235	82	82	102	93	50	44	35	46	98	77	81	62	300	257	80	68	330	299	50	41	66	60 20	3 195	_		90	81	1,035			1,124	1.100
1. Tuberculosis, respiratory 2. Tuberculosis, other 3. Syphilitic disease 4. Diphtheria 5. Whooping Cough 6. Meningococcal infections. 7. Acute poliomyelitis 8. Measles 9. Other infective and parasitic diseases 10. Malignant neoplasm, stomach 11. Malignant neoplasm, broast 12. Malignant neoplasm, breast 13. Malignant neoplasm, uterus 14. Other malignant and lymphatic neo-	- - - - - - 1 2 - -	- - - - - 1 1		- - - - - 2 1 2	1 	- - - - - 5 1 5	1 	1 3 4 5 2	1 3 13	- - 2 - - - - 1 7 1 10 2	1	- - - - - 2 1	- - - - 4 9	- - - - 1 3 1 2 2	- - - - - 2 1	- - - - - - 4 - 6	1 	- - - - - - - 1	1 1 - - - 2 11	- - - - - - - 2 3 2	- - - - - - 4 3 -	- - - - - - - - - - - - - - - - - - -	3 - 1 - - - - 2 9 21 -	- 1 - - - - - 1 1 2 8 6	- - - - - 1 3 4 -	- - - - - - - 2 2 2 3 1	2 - 2 - - - - - 6 20 - -	- 1 - - - 3 9 2 12 7	1 - - - - - - 4	- - - - - - - 5	- - - - - - 2 5	- - - - - - 3 - 2 1		2 8			- - - - - - - - - - - - - - - - - - -	4 1 1 - - - - 34 61 - -	2 	6 1 3 - - 4 33	1 2 - - - 3 34 8 43 19	1 11 2 4 3 6 4 - 5 - 6 - 7 - 8 - 9 10 10 128 11 165 12 78 13 28
plasms 15. Leukæmia, aleukæmia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 20. Other heart disease 21. Other circulatory disease 22. Influenza 23. Pneumonia 24. Bronchitis 25. Other diseases of respiratory system 26. Ulcer of stomach and duodenum 27. Gastritis, enteritis and diarrhœa 28. Nephritis and nephrosis 29. Hyperplasia of prostate 30. Pregnancy, childbirth, abortion 31. Congenital malformations 32. Other defined and ill-defined diseases 33. Motor vehicle accidents 34. All other accidents 35. Suicide 36. Homicide and operations of war	1 3 9 2 6 3 -6 7 	7 9 1 4 2 2 1 1 1 2	- - 1 7 - 2 1 - - - - - 1 - - - - - - - - - - -	2 - 3 2 - 1	10 21 28 7 20 3 1 6 10 4 2 1 - 1 - 3 21 1	11 13 29 23 6 20 3 - 2 8 2 1 - - - 1 9 - 4 1	1 38 40 6 6 14 8 13 2 2 1 1 2 3 - 4 11 - 3 2 2 - 4 11 - 3 2 2 - 4 11 - 3 2 2 - 4 11 - 3 3 2 - 4 11 - 3 3 2 - 4 1 - 3 3 2 - 4	22 1 3 43 31 15 5 25 11 - 5 8 3 - 1 19 1 6 2	30 1 2 30 46 1 17 12 2 11 16 5 2 - 4 3 - - 2 1 4 8 8 3	17 1 47 35 2 34 19 1 14 5 2 1 1 4 - 1 20 1 6 1	7 	5 - 19 8 - 15 3 - 5 4 1 - - - 1 13 - - - - - - - - - - - - -	7 	5 - 18 12 1 11 7 2 1 3 - - - 2 1 1 1 2 1 1 2 1 2 1 2 1 2 1 2 1	3 -2 7 15 -4 2 1 2 4 	7 	3 - 1 6 4 3 2 2 - 3 3 1	6 	10 -1 17 21 3 9 2 2 2 4 5 5 2 	6 -1 12 17 -16 4 -2 1 1 1 	8 1	4	35 3 1 30 67 4 38 9 - 10 18 2 4 1 1 2 2 1 8 4 4	16 4 1 62 32 7 41 7 - 16 5 1 - 22 2 6 2 1	10 2 1 5 15 3 8 4 1 6 6 1 - - 1 1 3 2 3	- 2 - - - - 1 7	27 1 2 41 57 8 40 9 2 23 25 4 4 - - - 3 27 11 9 2 2	20 2 54 35 6 62 9 - 13 8 1 - 4 23 2 11 3	- 1 1 1 1 - 8 1	-	11	4 1-1 3 3 3 5 3 3 4 7 2 2 2 3 3 3 18 -	53 488 244 38 28 8 9 - 2 4 4 3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	$\begin{bmatrix} 2 \\ -10 \\ 11 \\ 2 \end{bmatrix}$	5 1 9 5 4 21 - 1 1 1 - 1 1 - 1	7	9 - 1 16 9 1 14 6 - 6 1 - 1 1 1 8 1	102 3 8 149 202 22 102 44 9 43 69 17 7 2 11 9 78 16 23 9	84 3 8 195 143 28 144 57 36 32 9 3 4 9 -1 14 97 6 23 4	120 9 9 158 241 27 157 48 4 66 82 15 15 15 10 101 33 26 13	6 14 233 126 27 204 44 - 45 29	14 393 15 21 16 39 17 735 18 712 19 104 20 607 21 193 22 16 23 190 24 212 25 49 26 26 26 26 27 18 28 32 29 14 30 1 31 33 32 391 33 69 34 96 35 34
Deaths of infants under one year: Total Legitimate Illegitimate	1 1 -	1 1 -	1 1 -	2 2 -	4 4 -	3 3 -	5 5 -	8 7 1	6 6 -	5 4 1	-	2 2 -	3 3 -	6 6 -	2 2 -	2 2 -	1 1	3 2 1	2 2 2	4 4 -	1 1 -	-	7 5 2	12 11 1	3 3 -	3 3	9	13	1 1	1 1	1 2	5 5	4 3	5 5	- 1 1	3 2	2 2	25 25	36 33	35 31	38 36	134 125
Deaths of infants under four weeks: Total Legitimate Illegitimate	-	1 1 -	1 1 -	2 2 -	4 4 -	- - -	2 2 -	4 3 1	6 6	3 2 1	-	2 2 2 -	2 2 -	6 6	2 2 2	2 2 -	1 1 -	2 1	2 2	4 4	1 1	-	7 5 2	8 7	2 2	1 1		11			1 1	4 4	2 1	4 4	1 1	3 2	2 2	20 20	26 23	30 27	26 24	102 94
Deaths of infants under one week:		,	,									-							-	-			-		_		-	_	_	_ _	_ _		I			1			3	3	2	8
Legitimate	-	1 -	1	2 2 -	3 -		1 1 -	4 3 1	6 6 -	3 2 1		2 2 -	2 2 -	6 6 -	1 1 -	2 2 -	1 1 -	2 1 1	1 1 -	4 4 -	1 1 -	-	6 4 2	8 7 1	1 1 -	1 1 -		10	1 1 -	_	1 1	4 4	2 1 1	4	1	2 1	1	16 16	26 23 3	26 23 3	24 22	92 84
Live Births: Total Legitimate Illegitimate	72 69 3	72 67 5	27 27 -	26 25 1	202 196 6	236 225 11	374 350 24	336 325 11	372 357 15	322 305 17	109 102 7	107 104 3	168 161 7	163 155 8	145 144 1	147 143 4	70 69 1	68 66 2	282 275 7	275 261 14	103 101 2	96 94 2	326 303 23	52 2	08 18 01 17	76 6	655 6	20	85 7 78 6	7 11		247	233	94 91	62 60	136 128	121 1	,821 1 ,750 1	1,752	2,299 2 2,217 2	2,092	7,964 7,670
Stillbirths: Total	-	1 1 -	-	-	7 7	1 1 -	10 9 1	5 5	4 4 -	4 4	3 3	3 3	-	2 2	3 3	2 2	1 1	-	5 5	2 2	4 4	l l	13	11	3	4			_ _	2	4 7 4 1 3 1	8 6	3 3	3 3 3	1	2 2	1 1	33 32	20 20	53 48	36 34	142 134
Home Population	7,56	0	3,37		26,			000	38,99		12,0	- 20	16.2	-	-	-	-	-	-	-	-	- -	1	1	-	1	1	_ _	-	_ _	1 -	2			_	-	_	1	-	5	2	8
Comparability Factors: Births Deaths	1.00		1.0	7	1.0)2	0.	99	1.00	3	1.0	3	0.9 0.8	8	0.8 1.2	3	7,45 0.9 1.1	5	0.8 1.3	3	1.03 1.09		0,96 1.15		0.83 1.61		0.86 1.00		10,040 1.08 1.11	-	3,060 1.10 1.09	1.	04 89	9,31	5	18,77 1.10 0.02	_ -	0.97 1,12	_	0,96 1,09		0.97 1.10



IX. DISEASES SYSTEM	OF THE DIGE	STIVE	3	Year 1959	Year 1960	Year 1961	Year 1962	Year 1963
26. Ulcer of	f stomach and duod s, enteritis and diar		• •	39 19	25 21			26 18
X. DISEASES	OF THE GEN		• •	10	21	20	10	10
-	is and nephrosis lasia of prostate	• •	• •	53 19	28 27	42 20	41 28	32 14
OF PRE	ES AND COMPL GNANCY, CHILI IE PUERPERIUM	DBIRT						
30. Pregnan	ncy, childbirth, abo	rtion	• •	4	3	2	2	1
KIV. CONGENI	TAL MALFORM	OITA	NS					
31. Congen	ital malformations	• •	• •	43	44	38	58	33
	MS, SENILITY DE CONDITION		ILL-					
32. Other d	lefined and ill-defin	ed dise	ase s	378	366	338	374	391
XVII. ACCIDENT	•	S AN	D					
33. Motor v	vehicle accidents	• •	• •	59	64	53	51	69
34. All other		• •	• •	91	101			96
35. Suicide			• •	40	36	48	41	34
36. Homici	de and operations o	of war	• •	6	2	2	1	7

1944 1 1945 1 1946 1 1947 1 1948 1 1949 1 1950 1 1951 1 1952 1 1953 1 1954 1	No.	Rate	Ru No.		Whole (County	Rate for			
1944 1 1945 1 1946 1 1947 1 1948 1 1949 1 1950 1 1951 1 1952 1 1953 1 1954 1		Rate	No.				- England			
1945 1 1946 1 1947 1 1948 1 1949 1 1950 1 1951 1 1952 1 1953 1 1954 1	1 608			Rate	No.	Rate	and Wales			
1952 1 1953 1 1954 1	1,608 1,582 1,641 1,798 1,569 1,731 1,739	11.00 10.90 10.87 11.64 9.87 10.79 10.62 10.60	1,862 1,831 1,761 1,894 1,732 1,923 1,836 2,007	11.35 11.26 10.47 10.96 9.69 10.58 9.98 10.86	3,470 3,413 3,402 3,692 3,301 3,654 3,575 3,731	11.18 11.09 10.66 11.28 9.77 10.68 10.28 10.74	11.6 11.4 11.5 12.0 10.8 11.7 11.6 12.5			
1955 1	1,675 1,703 1,716	10.33 10.42 10.41	1,833 1,831 1,933	9.82 9.74 10.19	3,508 3,534 3,649	10.06 10.05 10.29	11.3 11.4 11.3			
1956 1 1957 1	1,751 1,659 1,683	10.51 9.86 9.84 10.02	2,047 2,096 2,074 2,103	10.67 10.68 10.26 10.15	3,798 3,755 3,757 3,848	10.59 10.29 10.06 10.09	11.7 11.7 11.5 11.7			
1959 1 1960 1 1961 1 1962 1	1,808 1,802 1,930 1,892 2,017	10.24 10.03 10.37 9.98 10.50	2,166 2,206 2,335 2,380 2,405	10.17 10.09 10.40 10.37 10.27	3,974 4,008 4,265 4,272 4,422	10.20 10.06 10.38 10.19 10.37	11.6 11.5 12.0 11.9			

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

National Health Service Act, 1946

SECTION 21 Health Centres

During 1963 no proposals were submitted for the provision of health centres in the county.

SECTION 22

Care of Mothers and Young Children

Ante-Natal Services

ions held
s and Thursdays, 9.30 a.m.
s and Thursdays, 2.30 p.m.
lays, 2 p.m.
and Thursdays, 2.15 p.m.
2 p.m.

Ante-Natal Clinics

The figures below relate to the number of expectant mothers who attended Ante-Natal Clinics in the County during 1963.

Total number of women in attendance for:

(i)	Ante-natal examination		• •	673
(ii)	Post-natal examination			_
Total s	sessions held by:			
(i)	Medical Officers			122
(ii)	Midwives		• •	24
(iii)	General Practitioners	employed	on a	
	sessional basis	• •		76
				222

Relaxation Classes

The following table gives the number of sessions held, patients attended and attendances at these relaxation classes.

	Number of Sessions		Number of Patients		Number of Attendances	
	1962	1963	1962	1963	1962	1963
Ashby-de-la-Zouch	41	42	89	61	732	612
Braunstone	8	64	28	50	62	670
Coalville	81	82	205	211	1,694	1,619
Hinckley	98	90	236	220	1,611	1,598
Loughborough	41	42	172	162	1,145	1,125
Market Harborough	81	92	84	81	655	738
Oadby	40	50	84	27	721	339
South Wigston	56	49	84	132	761	868
Thurnby Lodge	23	*	13	*	72	*
Totals	469	511	995	944	7,453	7,569

*Closed from 31st December, 1962.

Two classes at Braunstone from 11th June, 1963.

Dental Treatment of Expectant and Nursing Mothers, and Pre-School Children

Owing to the shortage of dental staff, the suspension of treatment for expectant and nursing mothers, and pre-school children has of necessity been continued, except in the Loughborough area. In other parts of the county, pre-school children are treated where application is made. Details of such treatment are included in the table below.

Two expectant and nursing mothers were examined. 147 children under five, of the 257 examined, were found to need treatment. 133 of these were treated and made dentally fit by the end of the year.

Forms of dental treatment provided are given below:

	igs and reatment ings		Nitrate ment ns or	100	ys	ral etics	Dentures provided		aphs
	Scalings Gum Trea	Fillings	Silver Nitra Treatment	Crowns	Extractions	General Anæsthetics	Full Upper or Lower	Partial Upper or Lower	Radiographs
Expectant and Nursing Mothers	Uniquis	blends	_	Menale	15		2	_	
Children under five	19	40	20		127	-	-	1	-

Child Welfare Centres

Place		Address	Sessions held
Anstey	• •	Church Hall,	
		Church Lane	2nd and 4th Mondays, 2.30 p.m.
Asfordby	• •	Parish Hall	2nd and 4th Thursdays, 2.30 p.m.
Ashby-de-la-Zouch	ļ	Baptist Room, Market Street	Thursdays, 2 p.m.
Bagworth	• •	Miners' Institute,	
O .		Station Road	1st and 3rd Wednesdays, 2 p.m.
Barlestone	• •	Church Room	2nd and 4th Tuesdays, 2 p.m.
Barrow-upon-Soar	• •	Church Room	2nd and 4th Wednesdays, 2.45 p.m.
Birstall No. 1	• •	Church Room	2nd and 4th Wednesdays, 2 p.m.
Birstall No. 2		Methodist Church	
		Room	1st and 3rd Thursdays, 2 p.m.
Blaby	• •	Baptist Schoolroom	1st and 3rd Tuesdays, 2 p.m.
Braunstone	• •	Trinity Church Room, Narborough Road, Leicester	2nd and 4th Wednesdays, 2 p.m.
Broughton Astley			1st and 3rd Tuesdays, 2 p.m.
Burbage	• •	Methodist Church	
Durbage	• •	Schoolroom, Windsor Street	2nd and 4th Thursdays, 2 p.m.
Castle Donington		Methodist Church Room	1 1st and 3rd Mondays, 2.30 p.m.
Claybrooke Magna			1st and 3rd Thursdays, 2 p.m.
Coalville		Health Clinic, Bridge	
		Road	Tuesdays, 2 p.m.
Coalville (Greenhil	1	Charnborough Road	
Estate)		Baptist Church	
Cosby	• •	Methodist Schoolroom	1st and 3rd Wednesdays, 2.30 p.m.
Countesthorpe	• •	Methodist Church	and the Three days 220 mm
		Schoolroom	
Croft	• •	The Village Hall	1st and 3rd Wednesdays, 2 p.m.
Desford	• •	Village Institute	1st and 3rd Tuesdays, 2 p.m.
Donisthorpe and Moira		Centenary Methodist Church Room, Donis-	2nd and 4th Tuesdays, 2 p.m.
wona	• •	thorpe Road, Moira	and the recodery of a pinne
Earl Shilton	• •	St. John Ambulance Brigade Hall, Alexander Avenue	1st and 3rd Thursdays, 2 p.m.
Earl Shilton		The Cedars Com-	
(The Cedars)		munity Centre, Shilton Road, Barwell	Wednesdays, 2 p.m.
Ellistown	• •	Old Church School	1st and 3rd Thursdays, 2 p.m.
Enderby	• •	Mission Room	1st and 3rd Wednesdays, 2 p.m.
Fleckney	• •	Village Hall	2nd and 4th Tuesdays, 2 p.m.
a roundly			T. C.

Place		Address		Sessions held
Glenfield		Wesleyan Rooms	• •	2nd and 4th Tuesdays, 2.30 p.m.
Glen Parva		War Memorial Hal		
Great Glen		Parochial Hall		0 1 1 1 1 1 2
Groby		Congregational Chu	ırch	
Hathern		Village Hall		y y Promot
Hinckley		Health Clinic,		p
		The Lawns		Tuesdays and Wednesdays, 2 p.m.
Houghton-on-the	-Hill	Village Hall	• •	1st and 3rd Mondays, 2 p.m.
Hugglescote	• •	Baptist Room		2nd and 4th Mondays, 2.30 p.m.
Huncote	• •	Methodist Church, Hinckley Road		2nd and 4th Mondays, 2 p.m.
Ibstock		Baptist Chapel		
		Schoolroom	• •	2nd and 4th Thursdays, 2 p.m.
Kegworth	• •	Wesleyan Schoolro	om,	
TZ'1 .1		High Street	• •	2nd and 4th Wednesdays, 2.30 p.m.
Kibworth	• •	Village Hall	• •	2nd and 4th Wednesdays, 2.30 p.m.
Kirby Muxloe	• •	St. Bartholomew's Church Rooms	• •	2nd and 4th Tuesdays, 2.30 p.m.
Leicester Forest I	East	St. Mary's Hall, St. Mary's Avenue Braunstone Lane	,	1st and 3rd Mondays, 2 p.m.
Long Clawson	• •	Methodist Church Schoolroom	• •	1st and 3rd Thursdays, 2 p.m.
Loughborough	• •	Lemyngton Street	• •	Tuesdays, Thursdays and Fridays,
Loughborough	• •	Emmanuel Church Hall, Forest Road		2 p.m. Mondays and Wednesdays, 2 p.m.
Lutterworth	• •	Church Hall, Coven		p.m.
		Road	• •	1st and 3rd Thursdays, 2.30 p.m.
Market Bosworth	• •	St. Peter's Hall	• •	3rd Tuesdays, 2 p.m.
Market Harboroug	gh	Health Clinic, High Street		Wednesdays, 2.30 p.m.
Market Harboroug	gh	Community Centre,		p,
		Southern Estate	• •	1st, 3rd and 5th Tuesdays, 2.30 p.m.
Markfield	• •	Miners' Institute	• •	1st and 3rd Thursdays, 2 p.m.
Melton Mowbray	• •	Health Clinic,		
3.6		Asfordby Road	• •	Mondays and Wednesdays, 2 p.m.
Mountsorrel	• •	Church Hall	• •	1st and 3rd Tuesdays, 2.30 p.m.
Narborough	• •	Robjohn Hall	• •	2nd and 4th Wednesdays, 2 p.m.
Newbold Verdon	• •	Church Hall	• •	2nd and 4th Thursdays, 2 p.m.
Oadby	• •	Baptist Schoolroom	• •	Mondays, 2 p.m.
Old Dalby	• •	Ordnance Depot	• •	1st and 3rd Wednesdays, 2 p.m.
Queniborough	• •	St. Mary's Church		0 1 1
Ouom				2nd and 4th Wednesdays, 2 p.m.
Quorn	• •	Village Hall	• •	1st and 3rd Wednesdays, 2.30 p.m.

Place		Address	Sessions held
Ratby		Church Rooms	1st and 3rd Tuesdays, 2 p.m.
Rearsby		Village Hall	1st and 3rd Tuesdays, 2.30 p.m.
Rothley		Village Hall	1st and 3rd Mondays, 2.30 p.m.
Scraptoft		Village Institute	1st and 3rd Wednesdays, 2 p.m.
Shepshed	• •	St. Winefride's Parish Hall, Charnwood Road	2nd and 4th Wednesdays, 2 p.m.
Sileby	• •	Cossington Road	1st and 3rd Tuesdays, 2.15 p.m.
South Wigston	• •	Health Clinic, Countesthorpe Road	Wednesdays, 2 p.m.
Stoke Golding		Village Hall	2nd and 4th Thursdays, 2 p.m.
Stoney Stanton		Working Men's Club	* * *
•		and Institute	2nd and 4th Tuesdays, 1.30 p.m.
Syston		Red Cross Hall	Mondays, 2.30 p.m.
Thorpe Acre		Community Centre	Fridays, 2 p.m.
Thringstone	• •	Community Centre	2nd and 4th Tuesdays, 2.30 p.m.
Thurcaston	• •	Village Memorial Hall	1st and 3rd Wednesdays, 2 p.m
Thurmaston	• •	Bethel Methodist Church Room	2nd and 4th Tuesdays, 2.30 p.m.
Thurnby Lodge Estate		Thurnby Lodge Community Centre	Thursdays, 2 p.m.
Whetstone		Congregational School-	
		room	2nd and 4th Tuesdays, 2.30 p.m.
Whitwick	• •	Primitive Methodist Schoolroom	Mondays, 2.30 p.m.
Wigston Fields		The Poplars	Mondays, 2 p.m.
Wigston Fields	• •	Methodist Churchrooms Frederick Street Wigston Magna	Thursdays, 2.30 p.m.
Wigston Magna	• •	Methodist Church	
		Rooms, Moat Street	2nd and 4th Thursdays, 2.30 p.m.
Woodhouse Eaves		Village Hall	2nd and 4th Mondays, 2 p.m.
Wymeswold	• •	Village Hall	2nd and 4th Tuesdays, 2 p.m.

Summary of Statistics

	1963	1962
Number of meetings held during the year	2,410	2,246
Number of attendances during the year (children)	113,138	93,434
Number of examinations by Medical Officers:		
First examinations	4,083	3,847
Total examinations	9,466	9,275

Individual Child Welfare Centres. Average Attendances per Meeting

Cent	Children				
Cent	16			1962	1963
Anstey	• •	• •	• •	29.8	53.5
Asfordby	• •	• •	• •	29.0	47.1
Ashby-de-la-Zouch	• •			35.3	29.6
Bagworth	• •			17.5	22.3
Barlestone	• •	• •		33.0	40.0
Barrow-upon-Soar	• •	• •		42.9	45.7
Birstall No. 1	• •			79.2	81.8
Birstall No. 2	• •			65.8	97.5
Blaby	• •			43.6	50.5
Braunstone	• •			68.0	71.3
Broughton Astley	• •			25.9	29.2
Burbage	• •			56.3	66.0
Castle Donington	• •			22.4	23.2
Claybrooke Magna	• •		• •	26.9	36.9
Coalville		• •		23.7	30.3
Coalville (Greenhill Es	tate)	• •		18.1	22.1
Cosby		• •		23.3	19.7
Countesthorpe				32.7	34.6
Croft				22.4	23.3
Desford				42.8	49.5
Donisthorpe and Moir	a			26.7	31.5
Earl Shilton	• •			15.9	22.4
Earl Shilton (The Ced	ars)			35.3	45.6
Ellistown	• •			11.0	19.4
Enderby	• •			24.1	30.9
Fleckney (opened 23.4.	.63)	• •		Aphronounith	40.3
Glenfield	• •			91.0	94.9
Glen Parva (opened 26	.6.63)			Variance bland	26.6
Great Glen	• •			19.0	32.4
Groby		• • *		35.0	58.2
Hathern		• •		17.9	18.4
Hinckley				48.1	57.0
Houghton-on-the-Hill		• •		30.6	21.9
Hugglescote		• •		34.4	42.5
Huncote	• •			38.3	40.2
Ibstock				28.8	42.1
Kegworth				21.4	29.2
Kibworth				12.3	24.2
Kirby Muxloe		• •		38.9	47.8
Leicester Forest East				60.8	69.4
Long Clawson				12.1	17.7
	• •	• •		64.0	59.5
Loughborough Emman	uel (op			-	44.8
T 44 41		• •		53.5	50.1

ntinued				Chil	dren
Ce	ntre			1962	1963
Market Bosworth	• •			20.9	26.9
Market Harborough				57.0	76.8
Market Harborough			i	38.4	45.7
Markfield				29.8	43.6
Melton Mowbray	• •			81.8	83.7
Mountsorrel	• •			57.5	76.5
Narborough	• •			68.2	66.5
Newbold Verdon				21.1	37.4
Oadby	• •			41.9	63.7
Old Dalby	• •	• •		17.0	21.6
Queniborough	• •			22.0	28.8
Quorn				37.3	39.9
Ratby				18.4	27.8
Rearsby				16.7	26.7
Rothley	• •			37.7	43.2
Scraptoft	• •			30.2	44.3
Stoke Golding	• •	• •	• •	24.4	32.6
Shepshed	• •	• •		58.3	70.3
Sileby	• •	• •		81.8	67.2
South Wigston	• •	• •		67.8	58.7
Stoney Stanton	• •	• •		41.8	40.8
Syston	• •			47.8	58.8
Thorpe Acre	• •	• •		31.7	25.8
Thringstone	• •	• •		12.4	20.3
Thurcaston	• •	• •	• •	30.6	32.8
Thurmaston	• •	• •	• •	41.9	53.3
Thurnby Lodge	• •	• •	• •	51.2	87.0
Whetstone	• •	• •		26.3	26.6
Whitwick	• •		• •	66.9	59.3
Wigston Fields		• •	• •	55.2	47.0
Wigston Fields (The	Poplars)) (opened	11.2.63)		81.6
Wigston Magna	• •	• •	• •	35.1	33.4
Woodhouse Eaves		• •	• •	23.1	29.8
Wymeswold	• •	• •		47.3	35.1

Note: The centres at Old Dalby, Queniborough and Stoke Golding are purely "weighing centres" run by the Health Visitor for the district.

The Domiciliary Care of Premature Infants

In 1963 the number of premature live births shows an increase of 27 over the previous year.

The tables below give the premature live birth figures for this county and also those for England and Wales.

Premature Live Births

Leicestershire

	1957	1958	1959	1960	1961	1962	1963
Born in Institutions	265	247	271	273	308	335	344
Born at Home or in a Nursing	_						
Home	147	110	118	120	_ 133	116	134
Total	412	357	389	393	441	451	478
% Premature live births of total live births	6.7	5.6	5.7	5.6	5.9	5.7	5.9

England and Wales

% Premature live births of total live births		6.8	6.7	6.7	6.7	7.6	*
--	--	-----	-----	-----	-----	-----	---

^{*}Not available

Details of premature stillbirths notified during 1963 are set out below, with the 1962 figures for comparison.

		1962	1963
In hospital	• •	58	5 5
At home or in a nursing home	• •	13	21
Total		71	76

	PREMATURE			Born	At home or in semon shapen	(14)	က	9	000	3		21																	
	PREM		•	B	lstiqsod nI	(13)	6	11	4.	000	1	55																	
			al on	tal on		In 7 and under 28 days	(12)		1		1																		
		ره	Transferred to hospital on or before 28th day	Died	In I and under 7	(11)			1	1	,	60																	
		nursing home	sferred to or before	_	Within 24 hrs. drith	(10)		1		1	1	C1																	
	S	েব -	Trans		Total births	6)	2	.c	13	7.0	9	31																	
	BIRTHS	Born at home or in	lome ne		In 7 and under 28 days	8	1	1		1																			
	LIVE]	at hon	Nursed, entirely at home or in a nursing home	Died	In I and under 7	3	1	_		1	63	4																	
	RE	Borr			Within 24 hrs.	(9)		61	1		1	33																	
design that the second second	PREMATU				edrrid latoT	(5)		ಣ	10	13	92	103																	
	PR	ı		Died	In 7 and under 28 days	(4)	ı	63	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ಣ																	
		ospital			Died	Died	In I and under 7 days	(3)	က	ಣ		p	ಕು	17															
			*Born in hospital																					.erd 4.2 nidiiW driid lo	(2)	; ;	10		ಣ
	*				sarrid latoT	(1)	15	30	08	11	142	344																	
							1. 2 lb. 3 oz. or less	2. Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	3. Over 3 lb. 4 oz. up to and including 4 lb. 6 oz	4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz	5. Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	6. Total																	

*The group under this heading will include cases which may be born in one hospital and transferred to another

Unmarried Mothers and their Children

The Health Visitors undertake the supervision of unmarried mothers and their children. The Superintendent Health Visitor, if necessary, makes arrangements for the confinement, domiciliary or institutional, or secures admission to a special home for such cases. An agreement is in force with the St. Saviour's Diocesan Maternity Home at Northampton, for the admission of unmarried expectant mothers. During their stay at the homes which is usually from a few weeks before the confinement to three months afterwards, training is given in domestic work and child welfare. Cases requiring special attention, which are unsuitable for this home are sent to other selected homes which cater for certain difficulties.

The Leicester Diocesan Moral Welfare Association arranges visits to cases in difficulty. An annual grant is made to the Association for its services in connection with unmarried mothers and their children.

The following table shows the number of illegitimate live births which have occurred during the past 20 years.

Year	Total live births	Illegitimate live births	Illegitimacy percentage of total live births
1944	6,536	385	5.89
1945	5,783	532	9.20
1946	6,563	383	5.84
1947	6,948	324	4.66
1948	6,363	297	4.66
1949	5,936	226	3.81
1950	5,624	209	3.71
1951	5,567	198	3.56
1952	5,463	213	3.90
1953	5,422	188	3.46
1954	5,145	169	3.28
1955	5,297	168	3.17
1956	5,611	173	3.07
1957	6,155	184	2.99
1958	6,371	193	3.03
1959	6,787	183	2.70
1960	7,076	235	3.32
1961	7,506	278	3.70
1962	7,903	299	3.78
1963	7,964	294	3.69

During the year 28 unmarried mothers were sent to the following homes:

St. Saviour's, Northampton	• •	• •	21
St. Bridget's, Chester	• •	• •	2
The Quarry, Lincoln	• •	• •	4
St. Faith's Shelter, Coventry	• •	• •	1
			28

Eye Treatment

Children of pre-school age who are found to require eye treatment are referred to the School Medical Department; prescriptions being dealt with by arrangement with the Sheffield Regional Hospital Board.

Day Nurseries

The attendances of the two day nurseries in the County, at Hinckley and Loughborough, and the number of welfare cases in attendance, have been reviewed from time to time and have remained at a satisfactory level.

				Hinckley	Loughborough	Totals
Number of appr	oved plac	es:				
0-2 years	-		• •	15	15	30
2-5 years				25	35	60
Number of ch	ildren on	register,	31st			
December, 19	63:					
0-2 years	• •		• •	6	17	23
2-5 years	• •	• •	• •	33	33	66
Average daily at	tendances					
0-2 years	• •			11	14	25
	• •	• •	• •	22	26	48

Maternity Outfits

During the year, 4,016 standard outfits, together with a bottle of suitable antiseptic, were issued by the department. 146 modified outfits were issued for use in Maternity Hospital discharges up to three days after confinement.

Birth Control

Suitable cases are referred to clinics held by the Leicester & District Family Planning Association. From April this year, these clinics replace the ones held by the Leicester City Health authorities. A grant is made based on an annual mean of 40 county patients.

Deafness in Young Children

The special clinic for young deaf children deals with children who are referred by their own doctors or detected by routine testing at infant welfare centres.

Mr. Jenkins, Ear, Nose and Throat consultant, sees any cases which are referred to him.

Sir Alexander and Lady Ewing also visit and advise on cases presenting special problems.

Number of clinics held				4.0
Number of children attended	l			112
Number of pre-school E.N.T	. clinics		~**	
(Mr. Jenkins)	• •			8
Number of children seen at pr	re-school	E.N.T.	clinic	64
Total number of attendances				154
D 1 C				
Results of new cases:				
Not deaf	• •	• •	• •	5 0
Continued guidance	• •	• •	• •	20
Awaiting final diagnosis		• •		29
Issued with hearing aids	• •	• •	• •	4
Receiving home tuition	• •	• •	• •	6
Admitted to special schools	S	• •		3
Visits by Clinic Consultar	nt			
Number of visits	• •		• •	3
Number of children seen		• •		34
Results of Consultant's In	ivestiga	tions:		
Continued guidance				11
Not deaf		• •	• •	16
To be issued with hearing	aid		• •	4
For admission to special sc	hool		• •	3
Spropping of Infant Wals	ano Com	t		
Screening at Infant Welfa	are Gen	tres:		7.0
Number of sessions	• •	• •	• •	16
Number of children passed		_		278
Number of children failed	screening	7		2

Once again, I should like to record my appreciation of Sir Alexander and Lady Ewing, whose visits give great encouragement and stimulus to the staff of the clinic. Acknowledgement is also due to Mr. J. T. M. C. Jenkins and the specially trained health visitors whose work at the clinic is greatly appreciated.

Welfare Foods

There are now 127 distribution centres in the county, of which 69 are at Infant Welfare Centres, and the remainder at post offices, shops and private homes.

Great help is given by the Women's Voluntary Service, who deal very efficiently with the distribution in the larger towns, and who also find distributors, if requested, in the rural areas.

Apart from those for orange juice, figures for issues of Welfare Foods continue to show a decline.

The table below shows issues for the past five years.

		Dried Milk	Orange Juice bottles	Cod Liver Oil bottles	Vitamin A & D Tablets packets
1959	• •	88,374	213,240	25,520	23,005
1960		78,114	206,492	25,274	25,126
1961		70,801	129,119	16,998	19,687
1962		58,740	78,449	7,039	13,732
1963		51,103	86,391	6,365	12,733

SECTION 23

Midwifery

This service is administered in the main by the Leicestershire County Nursing Association, acting as agents of the County Council. Only in certain urban areas does the County Council employ a small number of whole-time midwives.

Number of Midwives Practising

A total of 158 midwives practised in the area at 31.12.63. Of these, 105 were domiciliary and 53 institutional midwives. The County Council employed 14 whole-time midwives, 82 were employed by the County Nursing Association, 9 were in private practice and 37 of the 53 institutional midwives were in hospitals in the National Health Service.

Number of cases attended

A summary of the cases attended in the County by domiciliary and institutional midwives during 1963 is given in the following table. 1,388 cases were delivered in institutions but were discharged before the tenth day and thus came under the care of the domiciliary midwives.

			Number of cases delivered in hospitals and other institutions but discharged and
Doctor not booked	Doctor booked	Total	attended by domiciliary midwives before the 10th day
73	3,176	3,249	1,388

Confinements in Institutions, 1963

I. Confinements occurring in institutions in the county:

	County	Non-County	Total
Institution	Cases	Cases	Cases
Ashby and District Hospital	274	55	329
Bosworth Park Infirmary	_	1	1
Kirby Muxloe, Roundhill Nursing Home	708	162	870
Loughborough General Hospital	271	6	277
Loughborough Radmoor Nursing Home	133	9	142
Lutterworth Cottage Hospital	95	1	96
Market Harborough and District Hospital	226	47	273
Melton Mowbray St. Mary's Hospital	439	25	464
		·	
Totals	2,146	306	2,452

2. Confinements of county cases occurring in institutions outside the county:

Institution			•	Cases
Leicester Royal Infirmary Maternity Hospi	ital	• •	• •	1,054
Leicester General Hospital	• •	• •	• •	670
Leicester, St. Francis Private Hospital	• •	• •	• •	196
Nuneaton, George Eliot Hospital	• •	• •	• •	162
Leicester, Westcotes Maternity Hospital	• •	• •	• •	162
Nottingham, Women's Hospital	• •	• •		89
Derby City Hospital	• •	• •		62
St. Mary's Hospital, Harborough Magna		• •		51
Burton-on-Trent, Andressey Hospital	• •	• •	• •	45
Burton-on-Trent, General Hospital	• •	• •	• •	25
Oakham, Memorial Hospital	• •	• •	• •	22
Derbyshire, Grove Hospital, Shardlow	• •	• •	• •	20
Grantham and Kesteven General Hospital	• •	• •	• •	2 0
Grantham, Hill View Hospital	• •	• •	• •	12
There was a total of 65 confinements at 33	2 hospital	ls which	had	
fewer than 10 confinements of Leicesters	shire pati	ents	• •	65
				0.055
				2,655

During the year a total of 8,157 confinements occurred to Leicestershire patients, 4,882 in institutions, whether in Leicestershire or not, and 3,275 were domiciliary confinements. The percentages of these confinements were 59.85% for institutional and 40.15% for domiciliary confinements.

Notifications received from Midwives

During the year notifications were received from midwives practising in the county as follows:

Requests for medical aid	• •	597
Liability of a midwife to be a source of infection	• •	82
Midwife having 'laid out the dead'		8
Death of mother or child: mother	- • •	_
child	• •	7
The occurrence of a stillbirth		26

Inspection of Midwives

Inspection of midwives and also the general nurses is carried out by officers on the staff of the County Nursing Association. During the year a total of 210 routine inspections were made of general nurses and 231 of midwives (this figure includes County Council, Independent and Hospital midwives).

Transport for Midwives

At the end of 1963 a total of 139 cars were in use, 67 being supplied by the County Council.

		County Council Cars	County Nursing Association Cars	Private Cars
County Council Midwives		5	_	9
C.N.A. Administration Staff		_	1	3
Nurse/Midwives and Nurses		55	_	59*
Spare Cars	• •	7	-	_
Totals	• •	67	1	71
		0		

^{*} Including 1 scooter.

Post-Graduate Courses

During the year four County Council midwives and 15 midwives employed by the County Nursing Association attended refresher courses.

Houses for District Nurses and Midwives

The following is a summary of the housing situation:

Houses owned by the County Council (including flats)	• •	17
Houses owned by County Nursing Association	• •	9
Houses owned by District Nursing Associations		8
Houses owned by nurse/midwives		54
Council houses rented to County Nursing Association or	County	
Council		7
Council houses rented direct to nurse/midwives		24
Other houses rented to County Nursing Association or	District	
Nursing Associations		3
Privately-owned houses rented to nurses		5
Furnished rooms, etc		4
To	otal	131

SECTION 24

Health Visiting

The Health Visiting staff visited a total of 48,622 cases. Details of these are given below. Duties in connexion with the School Health Service are not included.

Visits made to:			Cases	
Children born in 1963	• •	• •	7,820	
,, 1962	• •	• •	7,425	
,, 1958–61	• •	• •	22,884	
Total number of children	• •	• •	• •	38,129
Persons aged 65 or over	• •	• •	• •	2,948
Special visits at request of G.P.	or hospit	al to 1	persons	
aged 65 or over	• •	• •	• •	1,013
Mentally disordered persons	• •	• •	• •	222
Special visits at request of G.P. o	r hospita	l to m	entally	
disordered persons	• •	• •	• •	39
Persons discharged from hospita	l other	than	mental	
hospital	• •	• •	• •	187
Special visits at request of G.P.	or hospit	al to p	persons	
discharged from hospital	• •	• •	• •	107
Visits to tuberculous households	• •	• •	• •	1,283
Visits on account of infectious disea	ases	• •	• •	213
Other cases			• •	2,716
Visits regarding diabetics	• •	• •		1,050
Lectures	• •		• •	670
Visits regarding unmarried mothers			• •	45
Total cases	• •	• •		48,622

Staff Establishment

During the year the authorised establishment was as follows:

- 1 Superintendent Health Visitor
- 1 Deputy Superintendent Health Visitor
- 2 Health Visitors for Health Education
- 1 Health Visitor for the Care of Diabetics
- 47 Health Visitors

Training of Health Visitors

During the year two students completed the training course and were appointed to the staff as a qualified health visitor, and one student commenced training.

Courses

Six members of the health visiting staff attended Refresher Courses during the year.

Investigation of applications for admission to maternity accommodation

The following table shows the numbers of such investigations, etc., during the past five years.

	1959	1960	1961	1962	1963
Investigations carried out	1,267	1,285	1,310	1,242	1,372
Recommended for admission	1,008	1,050	996	1,001	1,064
Not recommended for admission	259	235	314	241	308

Investigation of applications for Chronic Sick accommodation

A total of 903 cases were investigated during the year, 46 less than the previous year.

The Health Visitors duties do not cease with the submission of the appropriate forms to the hospital authorities, as they continue visits in any cases where such help is advisable.

Health Visiting

One of the main features this year is that all Health Visitors are now on the telephone. This has proved a great success as General Practitioners and other Departments can contact the Health Visitor direct without the small delays caused by contact through Central Office.

In-service training was continued this year by the Health Visitors receiving lectures on Mental Health from Dr. McGregor at Carlton Hayes Hospital. This course was enjoyed by Health Visitors who felt they were better equipped to recognise early signs of mental breakdown and could draw the family Doctor's attention to these signs. On December 18/19, twelve Health Visitors had a special course for the assessment of hearing in young children. Professor and Lady Ewing came from the Manchester School to give the guidance.

The Superintendent Health Visitor and her deputy began this year more intensive case work with unmarried mothers to ensure they were given adequate help and guidance.

During this year we have had more requests for visits of observation from other bodies. Students from Teacher Training Colleges have visited Infant Welfare Centres to see the extent of child care today. In Hinckley, senior girls at school have also visited the Infant Welfare Centres to see and hear advice given on Mothercraft. We have also sent District Nurse students on home visits with the Health Visitor.

The secondment of Health Visitors to General Practitioners was discussed at length and it was felt this would be a good thing, and, despite administrative difficulties, would increase co-operation and provide a better service to the patient.

A discrepancy of visits recorded will show very markedly this year from previous years as 1963 was the beginning of the new figures needed by the Ministry, they now only need the number of cases visited for the first time this year, not the number of subsequent visits paid.

Old people increasingly take up more of the Health Visitors' time, and it will be noted that more old people were visited this year, and as this only records the first visit, subsequent visits would show a marked increase.

Six Health Visitors went on Refresher Courses this year and they greatly appreciated this opportunity to keep abreast with changes in the work of Health Departments.

Miss R. Taylor, Deputy Superintendent Health Visitor, retired this year, and her successor, Miss F. M. G. Oxford, was appointed.

SECTION 25 Home Nursing

Equiv. Wholeof (12)time (13)Student Home Nurses Parttime (12)Wholetime (11)Whole-Equiv. time of (9) (10) 10.0 of the Leicestershire County Nursing Association acting as agents on behalf of the County Council. Enrolled Assistant Nurses Parttime 6 20 Wholetime 8 Whole-Equiv. time (9) Jo 28.5 State Registered Nurses 9 (S.R.N., R.S.C.N., and R.F.N.) Parttime 9 57 Wholetime 33*(5) Whole-Supervisory Nursing Staff Equiv. of (3) time 1.5 (4) Administrative and Parttime 3 ಛ Wholetime 3 Vol. Org.

All the nurses are employees

The following tables give details of Home Nursing staff and work undertaken by them during 1963.

*Includes 4 male nurses

	10020	•		
Patients included in	· -	year (11)	1,517	107,424
Children included in	+	year (10)	286	2,226
Patients included in	(2)-(7) who were 65 or over at the time of the first visit	year (9)	3,524	94,954
	Totals	(8)	6,982	150,469
	Others	(7)		
	Maternal Compli- cations	(9)	14	415
	Tuber- culosis	(2)	42	2,433
	Infectious	(4)		
	Surgical	(3)	2,501	32,674
	Medice1	(2)	4,398	114,947
		(1)	Number of cases attended by Home Nurses of Vol. Org. during year	Number of visits paid by Home Nurses of Vol. Org. during year

SECTION 26

Vaccination against Smallpox and Poliomyelitis and Immunisation against Diphtheria and Whooping Cough

Vaccination against Smallpox

The following table shows the number of records of vaccination received by the Department during 1963. Most have been performed by general practitioners during either late 1962 or 1963.

Age at Vaccination	0-3 mths.	3–6 mths.	6–9 mths.	9–12 mths.	l yr.	2–4 yrs.	5–14 yrs.	15+ yrs.	Total
Vaccination	250	108	37	47	182	99	122	109	954
Re-vaccination						2	16	28	46

In 1959-61 inclusive (1962 omitted for comparison owing to abnormal figures) on average 3,490 Primary Vaccinations were recorded each year, only a quarter of this number was recorded in 1963. In the number of vaccinations recorded the reason for this marked drop is not at all clear. It is now our policy *not* to recommend smallpox vaccination in the first year of life and this no doubt accounts for part of the picture. Records are now shown under "Age at Vaccination". It is hoped that this will allow a better comparison of statistics in future. A leaflet is now sent to parents of new-born children advocating vaccination in the second year of life and it is hoped this will encourage vaccination at the later age.

Poliomyelitis Vaccination

1963 showed a further reduction in the use of Salk Vaccine but the number of children protected by an injected killed vaccine is increasing owing to the introduction of a quadruple vaccine designed to protect against Diphtheria, Whooping Cough and Tetanus as well as against Poliomyelitis. The most significant figures show we have records of at least 53% of Leicestershire children born in 1962 who have completed primary protection against Poliomyelitis.

The records of Poliomyelitis protection received during 1963 relate to vaccine given mainly in late 1962 or 1963 and are summarised below:

Primary Courses	No. of persons who have received a second injection of Salk Vaccine or third injection of Quadruple Vaccine	Oral Vaccine, three doses
Children born in 1963	27	828
Children born in 1962	170	3722
Children born in 1961	36	782
Persons born 1943–60	38	833
Persons born 1933–42	16	306
Others	24	372
Totals	311	6,843

Persons having third injection of Salk or fourth injection of Quad-	
ruple Vaccine after second injection of Salk or third injection of	
Quadruple Vaccine	187
Persons having one dose of Oral Vaccine following two injections	
of Salk or three injections of Quadruple Vaccine	1349
Reinforcement of polio protection: (children between 5th and 12th	
birthdays). Children given booster injection of killed vaccine	
after primary protection with killed vaccine	51
Children given one dose of Oral Vaccine following complete	
primary protection	1915

Vaccination against Whooping Cough

Almost without exception protection was conferred by means of three injections of "Triple" Vaccine. During 1963 records were received of a total of 6,025 children who had completed a primary course of protection against whooping cough, of these 5,899 were under the age of five years.

Immunisation against Diphtheria

Number of children for whom records were received during the year 1963 are shown below:

Born in	1963	1962	1961	1960	1959	1954 – 1958	1949 – 1953	Totals
Primary Immunisation	2227	3468	269	55	35	74	24	6152
Booster Injections	_	624	331	60	515	3051	155	4736

The returns show that about 70% of children in the County, born in 1962, have received primary protection against Diphtheria. This compares favourably with the national average of 65% for the same group of children.

Protection against Tetanus

The dangers associated with the use (especially repeated use) of Antitetanus serum (A.T.S.) following injury are well known and within the County encouragement is given to secure active protection to avoid these troubles. Of particular note is the scheme introduced at one of the hospitals towards the end of the year. All general practitioners in the area were advised of the scheme in advance of its inception. Each child up to the age of 15 years who has an injection of A.T.S. at the hospital is given a letter to take home explaining the need for active protection using Tetanus Toxoid. It is too early yet to assess the response, but the long interval required between second and third doses seems to be one adverse factor in the scheme.

The total number of children having completed a primary course of protection during the year is uncertain but almost all the children having primary protection against diphtheria have a vaccine which also protects against tetanus. The number of records received in the year for primary courses against tetanus only was 325.

SECTION 27

Ambulance Service

During 1963 the changeover from A.M. (Amplitude Modulation) to F.M. (Frequency Modulation) radio telephone equipment was commenced.

The advantages of F.M. over A.M. are better signal strength, freedom from interference and a clearer signal. With A.M. the signal strength gradually dissipates over distance of range. With F.M. a better strength is obtainable over the complete range, e.g. if the nominal range of the equipment is, say 25 miles, the A.M. signal will decrease in strength with distance from the transmitter and gradually fade out. F.M. has better strength of signal over the whole range then disappears rather abruptly at the limit of the range. There is also a greater possibility of increased range with F.M.

One of the most striking aspects of F.M. is the quietness of the equipment during operation—there is little or no background noise. This is accounted for by a specially designed Squelch circuit plus the fact that unsuppressed ignition, electric welding plant, static electricity, etc., cannot be received on F.M. equipment, resulting in much less interference.

Because of the greater selectivity, freedom from interference, greater range, lack of background noise, the quality of signal is improved. Further, the effects mentioned provide a better reception in "Black Spots" where reception was hitherto non-existent with A.M. equipment.

New F.M. equipment has been installed at the Fixed Station, at the Control Room at Ambulance Headquarters and on 23 vehicles.

24-hour Stations are considered to be more efficient than 16-hour stations with men on standby duty at the station or at home. It is better to have a man alert and ready for an emergency, which is invariably the cause for a call at night, rather than a man who has already worked 8 hours or more and is then disturbed from his bed to meet the call.

The first stage in providing 24-hour manning of all Ambulance Stations was completed when Avenue Road, Leicester and Coalville became 24-hour Stations in April and August respectively.

To cater for the M.1 Motorway extension through the County, two additional ambulances were purchased.

Training Scheme

It has been felt for some considerable time that a training scheme for fulltime ambulance service staff is desirable. The scheme, as set out below, for Standard Training has been put into operation.

Object

- 1. To provide a highly trained and efficient staff to deal with the care and transport of sick and injured persons by the Ambulance Service, as required by the National Health Service Acts.
- 2. To give to members of the Ambulance Service Staff proper teaching so as to avoid any serious reflection on the Service in their dealings with the 'professions' and the general public.
- 3. To raise the general standard and ability to an advanced level.
- 4. To standardise methods and techniques for carrying out the general duties of Ambulance Service Staff.
- 5. To produce progressively qualified ambulance crews, capable of specialised duties from whom vacancies for promotion can be filled.
- 6. To obtain a nucleus on which the Emergency Service, incorporating the Civil Defence Ambulance and First Aid Section, can be formed quickly, and on which to base a Major Disaster Procedure in peace time.

Training Hours

Training is carried out during the normal day duty hours, 0900—1730 on Monday to Friday inclusive. Students are completely detached from their normal duties within the Service and training is carried out from October to April inclusive, with breaks for Bank Holidays.

Size of Class

The class comprises not more than eight persons so that the individual tuition required can be given.

The training scheme will not replace in any way the obligation to hold a current First Aid Certificate of the Red Cross, St. John Ambulance Brigade or St. Andrews Association, which at present is required for the appropriate payment, but the scheme may well be considered later to supersede such certificates.

The Progression of Training

1. Compulsory Standard Training—1st year, is of two weeks' duration for all existing staff and new entrants. A high standard of efficiency must be shown.

Examinations, Oral and Written are held at the end of the first week.

Examinations, Oral, Written and Practical are held at the termination of each course.

- 2. Compulsory Advanced Training—2nd year, will be undertaken by all staff and the duration of the course will be two weeks.
- 3. Refresher Training will be undertaken annually after satisfactory conclusion of 1 and 2.
- 4. Optional Specialised Training. This training will consist of courses for potential officers, control staff, etc.

Instructors are drawn from existing staff in the main, from officers and men with qualifications as instructors. A number of films are used and a local hospital physiotherapist has assisted in the teaching of patient handling.

Every member of the operational staff, including Control Room personnel, has completed the standard training. The whole scheme up to now has been very enlightening and popular with all concerned.

Civil Defence

Training has continued throughout the year at Coalville, Hinckley, Loughborough and Melton Mowbray. Driving instruction for volunteers at Coalville, Loughborough and Melton Mowbray, was carried out.

Part-time instructors have attended once a month throughout the year at Civil Defence Headquarters for the purpose of improving their technique and furthering their knowledge.

Two additional Civil Defence Ambulances were supplied on free loan by the Ministry of Health, making a total of 7 ambulances and 3 P.E. Vehicles.

Day exercises on three Sundays were held at Billesdon. On two of the days the mornings were devoted to instruction in Light Rescue, knots and lashings, by a Rescue Section Instructor, followed by practice on casualties in the afternoon, plus driving exercises, map reading, loading and unloading of ambulances. A mid-day meal was provided by the Emergency Feeding Section.

The first contingent of volunteers to take the Standard Test did so on the 18th July. 11 out of 12 were successful in passing. An extended First Aid Course—part of the Advanced Training Syllabus—for Members who had passed the Standard Test, was held in December at Civil Defence Headquarters.

First Aid Courses were undertaken for other Sections of the Civil Defence Corps by Ambulance and First Aid Section Instructors, in various parts of the County.

Four Locally Trained Instructors attended qualifying courses at the Home Office School at Falfield. The results were—I Credit, 2 Full Passes, I Functional. One other Instructor re-qualified.

Safe Driving Awards for 1963 were gained by 89 members of the staff, representing 82% of those entered.

The figures below show the number of vehicles and staff at the end of the year.

Ambulances (2–4 Stretchers)		32
Dual-Purpose Vehicles (1 Stretcher)		16
Sitting Case Vehicles		5
Service Van	• •	1
		-
Total		54
Station Off		_
Station Officers	• •	11~
Shift Leaders		23
Driver/Attendants	•_•	86
Female Attendants		9
Sub-Controller		
(Leicester Royal Infirmary)		1
Clerk/Telephonists	• •	3
Control Assistants		2
Mechanics		5
Driver/Cleaner		1
Total		141

The figures for the year show that the Ambulance Service carried 158,657 patients a total of 1,291,406 miles as follows:

		Patients	Miles
		carried	travelled
National Health Service	• •	132,856	1,213,650
Other Services	• •	25,801	77,756
		158,657	1,291,406

		Pati	Patients carried	77			M	Miles travelled	çç	
Station	Year 1959	Year 1960	Year 1961	Year 1962	Year 1963	Year 1959	Year 1960	Year 1961	Year 1962	Year 1963
5 Ireton Road, LEICESTER	35,130	35,774	35,928	31,828	32,157	279,527	295,180	281,514	268,573	248,915
LEICESTER	18,898	21,046	22,166	24,759	27,064	142,989	152,335	152,497	174,879	231,831
Broad Street, COALVILLE	24,819	28,430	28,862	31,174	31,237	165,080	175,968	189,014	206,717	231,018
HINCKLEY	13,162	13,663	13,539	14,890	16,060	90,310	103,105	106,979	111,064	131,923
LOUGHBOROUGH	14,151	15,734	16,730	19,807	21,178	113,473	114,780	120,561	140,693	154,486
LUTTERWORTH	4,661	5,312	5,817	6,155	7,308	42,096	47,693	52,491	52,688	63,400
MARKET HARBOROUGH	5,513	699'9	8,213	9,113	9,916	62,011	68,442	78,494	80,161	87,935
War Memorial Hospital, MELTON MOWBRAY	6,732	8,036	10,794	12,871	13,737	82,247	88,182	111,246	134,172	141,898
Totals	123,066	134,664	142,049	150,597	158,657	977,733	1,045,685	1,092,796	1,168,947	1,291,406

SECTION 28

Prevention of Illness, Care and After-Care

After-Care of Patients Discharged from Hospital

Patients discharged from hospital who are in need of nursing care in some form or other are looked after by the Home Nursing Staff of the Leicestershire County Nursing Association. When no nursing care is required a health visitor can usually deal with the case.

Convalescent Home Treatment

During 1963 the number of persons sent to convalescent homes was 86, an increase of 14 on the figures for 1962.

The 86 cases were sent to the following homes:

Sheringham House Convalescent Hon	ne	• •	39
Hunstanton Convalescent Home	• •	• •	17
Overstrand Hall Convalescent Home	• •	• •	20
Roecliffe Manor Convalescent Home	• •	• •	6
"House Beautiful", Bournemouth	• •	• •	3
"Caxton House", Limpsfield	• •	• •	1
			86

Diabetics

During 1963 the Health Visitor for the Care of Diabetics made 1,050 visits to such patients and also attended the diabetic clinic held at the Leicester Royal Infirmary.

Health Education

During 1963, the two Health Visitors concerned have concentrated on two or three important aspects of health education.

With further co-operation from Heads of Senior Schools, parentcraft talks were given with emphasis on sex education and the dangers to health in smoking.

To promote the 'Smoking and Health' campaign a poster competition was held for children in junior and senior schools for which six prizes were awarded by Leicester County Council. This was a most stimulating and successful exercise.

The number of Ante-natal Relaxation classes continues to increase. A second class was instituted at Braunstone. Thanks are again due to the mid-

wives who attended and gave practical demonstrations of the gas and air analgesics.

The prevention of accidents in the home, especially those involving burns, was the theme of a 'Buy for Safety' display by County Home Safety Committees. This display (see frontispiece) was mounted at the Home Life Exhibition in the Granby Halls, Leicester and featured flame-proof materials.

During the year, eight Ante-natal and Relaxation classes were visited as follows:

1 Class		• •	received	90	visits
1 Class		• •	>>	82	>>
1 Class	2 Sessions weekly	• •	"	92	22
1 Class		• •	35	64	33
1 Class				42	,,
		• •	33		
1 Class	W7 1.1	• •	>>	49	22
1 Class	Weekly sessions		,,	42	22
1 Class		• •	>>	50	22

Visits paid and the numbers present at all clinics, centres and meetings where health education talks were given are set out below with the previous year's figures for comparison.

	Vis	its	Aud	ienc es
	1962	1963	1962	1963
Ante-natal Relaxation Classes	389	511	5,823	7,561
Health Visitor Students	4	3	32	28
Schools	112	130	4,295	5,077
Home Help Courses	14	14	3 10	462
Women's Institutes	4	14	135	348
Parent-Teacher Association	2	1	77	24
Young Wives Groups	8	14	219	503
Women's Groups	3	4	75	71
Mothers' Unions	6	-1	145	60
Townswomen's Guilds	1	-	18	-
Youth Fellowship	1	2	24	129
Old People's Clubs	1	3	22	189
Miscellaneous	3	2	85	72
St. John's Ambulance Brigade	1	3	60	83
British Red Cross	_	2	_	24
Accident Prevention Committees	6	7	226	1,111
(one additional formed Febru-				
ary, 1963)				
Business and Professional				
Women's Clubs	_	1	_	20
Residential Child Care Course	_	1	_	12
City of Leicester Home Safety				
Committee	_	1	_	6 0
School of Nursing		1	torne.	19

The figures above do not include talks given from time to time by other members of the department's staff.

Tuberculosis

The following is the joint report of the County Medical Officer and the Consultant Chest Physician.

				Year 1963		Year 1953	Average for ten years
Respiratory tul	berculosis	s:		1000	1902	1900	1953 to 1962
Notifications	• •	• •	• •	82	70	201	132
Deaths	• •	• •	• •	11	15	57	29
Death-rate	• •	• •	• •	0.03	0.04	0.16	0.08
Non-respirator	y tubercı	ılosis:					
Notifications	• •	• •	• •	19	18	68.	36
Deaths	• •	• •		4	2	8	5
Death-rate	• •	• •	• •	0.008	0.005	0.02	0.01
Total for both respiratory to	_	-	on-				
Notifications	• •	• •	• •	101	88	269	168
Deaths	• •	• •	• •	15	17	65	34

During the past year there has been an increase in notifications of respiratory tuberculosis from 70 to 82, i.e. 17%. Whether or not this is a very significant increase it is difficult to assess, because undoubtedly in 1962 the notifications were exceptionally low. (In 1961 the notifications of respiratory tuberculosis were 97). Nevertheless one has to look at this rise in notifications with concern, as it is the first time since 1952 that there has been any appreciable rise. What are the possible reasons? Does tuberculosis in immigrants play any part? We have analysed our figures for 1963 and 7 of these notifications arose in immigrants, and to be more specific, coloured immigrants. In 1962 we had 3 cases arising in such immigrants, so there is a slight increase in that particular group. 9 cases of respiratory tuberculosis arose in young persons under the age of 14 who developed tuberculosis before they could normally have been protected by B.C.G. The incidence of young persons with tuberculosis in this age group is certainly not going down appreciably during the past few years and it is noticed that an open case of respiratory tuberculosis in a household nowadays produces a crop of cases of tuberculosis where there are young children under the age of 13. When we come to consider the incidence of tuberculosis in contacts, we will see that there is a significant rise in this group. We think it would be fair to say that before getting too worried about this rise in respiratory tuberculosis in one year, we must bear in mind the three things already mentioned: the abnormally low incidence of respiratory tuberculosis in 1962, the slight addition to the problem from immigrants in 1963, and the greater lack of natural immunity in young persons under the age of 13. Probably all three factors play a part in the 1963 figures. The deaths from respiratory tuberculosis were exceptionally low, being 11, and

this is so low as to make further comment unnecessary. Turning to non-respiratory tuberculosis, the notifications were approximately the same, being 19 for 1963 and 18 for 1962. The deaths were 4 for 1963 and 2 for 1962.

We have once more kept a register of resistant cases, as we are in fact now bound to do, and the number remains exactly the same, namely 25, though there is a slight increase from 8 to 11 of those classified as highly resistant. The problem of resistant tuberculosis does not appear to be perhaps quite as serious as one might at first think. It is true that there are 25 persons in Leicestershire from whom occasionally tubercle bacilli resistant to the standard anti-tuberculous forms of chemotherapy can be isolated on culture, but when one sees these patients, the majority of them are fairly well and few, if any, have sputum—a great contrast to the old case of tuberculosis before the days of chemotherapy. Nor do we appear to be getting any cases arising from these resistant cases and therefore one must not over-emphasise their potential infectivity. Once again we wish to pay tribute to the great help we have received from the Public Health Laboratory.

At the beginning of 1963 there were 1,426 cases on the register and during the year 50 cases were transferred to the county. 99 new cases were added to the register and 225 were removed from the register as cured, 25 died (all causes), 27 were transferred to other areas and 5 removed for other reasons. The number on the register on 31.12.63 was 1,293, a reduction of 133 or 9.3%.

Chest Clinic Service

There is nothing additional to report about the development of the chest clinic service in Leicestershire. As usual we would like to pay tribute to the district nurses, who have helped us in the treatment of 42 cases of respiratory and non-respiratory tuberculosis.

Mass Radiography Unit

The Mass Radiography Unit visited in 1963, Melton Mowbray, Anstey, Loughborough College, Glenfrith Hospitals, four coalmines and five industrial undertakings. The groups X-rayed consisted of the general public, doctors' referrals, organised groups and strongly positive tuberculin tested schoolchildren. 21,925 people were X-rayed. 17 cases (14 male and 3 female) of pulmonary tuberculosis requiring close supervision were discovered, giving a rate of 0.77 per 1,000. There were 8 cases of carcinoma of the lung discovered (6 male and 2 female) as against 10 cases in 1962.

Home Help Department

In 1963 the assistance of a Home Help was required in 12 households and in 5 of these the patient was classified as infectious and the other 7 were non-infectious. We would like, as usual, to thank the Home Help Service for the help they so willingly gave to us with our patients.

Prevention, Care and After-Care

The total number of new notifications, both respiratory and non-respiratory, was 101 and from these 792 contacts were examined for the first time, 18 of whom were found to be suffering from tuberculosis. This is once more an increase of tuberculosis in contacts, as in 1962 only 12 such new cases were discovered by contact examination. This rise from 12 to 18 in contacts once more confirms the greater infectivity of an open case of respiratory tuberculosis. All contacts under the age of 30 were tuberculin tested and 597 were vaccinated with B.C.G. The fact that the number 792 includes those over 30, shows that the percentage requiring B.C.G. vaccination is very high, indicating the vulnerable state of the population as a whole.

The scheme for the X-raying of primiparae was continued and 1,403 cases were X-rayed, one of whom was found to have active pulmonary tuberculosis.

It is impossible to make any remarks about the chest service without being conscious of the tremendous problem of carcinoma of the lung. In 1963 165 persons died from this condition in Leicestershire, 145 of whom were men and 20 were women.

The Future

It is seen from the figures given in this section on tuberculosis that we have a long way to go before this condition can be considered any way on the path to elimination. As was mentioned in a report presented to the Domiciliary Services Sub-Committee of the Health and Welfare Committee, we cannot see any dramatic advance in the tuberculosis problem unless an absolutely new antibiotic is produced. Before the present drugs are effective the patient must take them for anything up to two years, or even longer, and therefore, while these drugs are a tremendous step forward, the fact that they take two years to kill the tubercle bacillus shows how resilient is the organism we are up against. Anyone who has grown up in the old tuberculosis service must at the moment feel a certain amount of anxiety about the future. It is at times almost thought to be unfashionable to devote one's energies primarily to the elimination of tuberculosis. Nevertheless this is the main responsibility of the chest service and it will not have done its job until it has achieved this object. Let us hope that nothing is done ever to weaken the power of the chest service to continue to concentrate on the elimination of tuberculosis. There are still approximately 20,000 cases per year in England and Wales and we must not be satisfied with a stand-still position, because that might eventually lead to tuberculosis slowly getting out of control as the service alters in the make-up of its personnel; the tubercle bacillus alters little and still needs a very firm hand.

B.C.G.—School Leavers

The scheme for B.C.G. vaccination of school leavers was continued during the year and the figures are given in the table below. The number of school children offered vaccination may vary from one calender year to another as the school year—September to July—is more appropriate for purposes of comparison. The continued drop in the percentage of positive tuberculin test is noticeable. This is what we expect as some indication of the diminishing prevalence of the disease. It is disturbing to note that 449 children who had accepted vaccination failed to receive it despite the fact that in some instances additional sessions had been held for absentees. There will always be a small number of children in whose case this failure is inevitable for some reason or other but this figure is too high and we hope to ensure that in future the follow-up system can reduce it considerably.

Year	Total Number of School Leavers offered Vaccination	Number of consents given	Number given Tuberculin Test	Number Positive	Number Negative	Number Vaccinated
1959	4,729	3,506 (74%)	3,304	908 (27%)	2,339 (71%)	2,267
1960	5,639	4,420 (78%)	4,196	906 (22%)	3,210 (77%)	3,198
19,61	7,465	5,980 (80%)	5,524	923 (17%)	4,453 (81%)	4,418
1962	6,655	5,398 (81%)	5,128	853 (17%)	4,177 (81%)	4,132
1963	6,538	5,108 (78%)	4,731	637 (13%)	4,081 (86%)	4,056

T.B.1-Return showing the work of the Chest Clinics during the year 1963

M. F. Ch. Total M. F. Cl.			0 0		J Car				
Number of notified cases of T.B. on clinic registers on 1st JANUARY, 1963 Total and the control of the cont			Kespi	ratory		~	Non-re	spirat	\sim
(2) Number of notified cases of T.B. on clinic registers on 1st JANUARY, 1963 (3) Children transferred to adults during the year (4) Cases lost sight of which returned to clinic during the year (5) Children transferred to adults during the year (6) Cases lost sight of which returned to clinic during the year (7) Cases lost sight of which returned to clinic during the year (8) Cases lost sight of which returned to clinic during the year (9) Totals of A and B (1) Recovered (2) Deformation transferred to adults during the year. (3) Removed to other H.M.C. or B.G. clinics (4) Children transferred to adults during the year. (5) Other reasons (6) Other reasons (7) Cother reasons (8) Children transferred to adults during the year. (8) Removed to cother H.M.C. or B.G. clinics (9) Totals of C (1) Recovered (1) Recovered (2) Deformation transferred to adults during the year. (3) Removed to other H.M.C. or B.G. clinics (4) Children transferred to adults during the year. (5) Other reasons (6) Children transferred to adults during the year. (7) Cother resons (8) Children transferred to adults during the year. (8) Removed as cother H.M.C. or B.G. clinics (9) Total number of new cases (excluding transfers) examined during the year. (8) Number of those in (2) Diagnosed as tuberculous (2) Not tuberculous (3) Number of those in (2) Not tuberculous (4) Number of those in (2) Not determined (as at 31st December, 1963) (6) Number of those in (2) Not determined (as at 31st December, 1963) (8) Number of those in (2) Not determined (as at 31st December, 1963) (9) Children transferred to a state of the transferred to a state of the transferred to the transferred to a state of the transferred to a state of the transferred to the transferred to a state of the transferred to the transferred to a state of the transferred to the transferr		M.	IT.	Ch.	Total	M.	Г	Ch.	Total
Number of NEW CASES diagnosed as tuberculous during the year: T.B. PLUS T.	(2) Transfers from clinics under other H.M.C's or B.G's during the year (3) Children transferred to adults during the year (4) Cases lost sight of which returned to clinic during the year	704 23 1	467	14 1 1	1,212	8 63 -	97	39	214
Totals of A and B	Number of NEW CASES diagnosed as tuberculous during the year: T.B. MINUS T.B. PLUS	300	\ \operatorname{\sqrt{2}}	∞	29	62.70	400	63	
Number of cases in (1) Recovered		780	508	50	1,338	88	113	42	243
Totals of C	Number of cases in (1) Recovered A and B written off (2) Died (all causes) clinic registers during (3) Removed to other H.M.C. or B.G. clinics (4) Children transferred to adults during the year. (5) Other reasons	108 23 14	92 9 1	2 1	202 24 23 1	00 -	1 3 7	0 - 0	
Number of notified cases of T.B. on clinic registers on 31st DECEMBER, 1963 Respiratory and Non-respiratory 1,605 1,971 837 4,41 28		147	103	က	253	6	12	14	1
(a) Total number of new cases (excluding transfers) examined during the year (b) Number of those in (a) (1) Diagnosed as tuberculous (2) Not tuberculous (3) Not determined (as at 31st December, 1963)	Number of notified cases of T.B. on clinic registers on 31st		405	i	1,085	79	101	28	208
(a) Total number of new cases (excluding transfers) examined during the year (b) Number of those in (a) (1) Diagnosed as tuberculous			Res	oirator	y and	Non-re	espirat	ory	1
(a) Total number of new cases (excluding transfers) examined during the year 1,605 (1,971) 837 4, (b) Number of those in (a) (1) Diagnosed as tuberculous (2) Not tuberculous (3) Not determined (as at 31st December, 1963) (1,971) 837 4, (2) At the year 159 508		M	•	压		Ö	h.	T	1 7
	(b)	1,60	ಸು ಹ ಜ I	1,9	71 6 59	50.	37 6 08 4	4,4	

NOTES.—(1) "Children" means persons under the age of 15. When a case, first diagnosed and placed on the register as a child, reaches 15 it is transferred to the adult register, but is not counted as a new case.

(2) As a few cases attend from outside the county, the table does not show the exact position relating to Leicestershire.

T.B.2-Tuberculosis (Respiratory and Other). Notifications, Deaths and Death Rates

	Whole County	$\begin{array}{c} 0.16 \\ 0.02 \end{array}$	0.16	$\begin{array}{c} 0.10 \\ 0.03 \end{array}$	0.09	0.06	0.05	0.05	0.05	0.05	0.04	0.08	0.03
Death Rates	Rural	0.17	$0.11 \\ 0.005$	0.08	0.10	0.04	0.03	0.05	0.05	0.04	0.04	0.07	0.03
	Urban	0.15	0.21	$0.12 \\ 0.02$	0.08	0.07	0.07	0.05	0.05	0.06	0.03	0.09	0.02
ths	Whole	57	95 3	36 10	3 5 5	21 5	20 9	18	20 2	20	15	29 5	11
Number of Deaths	Rural	32 8	20	16	19	& ¢1	r- 00	10	-	∞	10	14	F 69
Nur	Urban	25	35	20	14	13	13	∞ c₁	0 1	12 3	ъ-	15	1
cations	Whole	201	186 56	188	135 38	124	128	92	99	97 29	70	132 36	82 19
Number of Notifications	Rural	92	95	91	58 27	60	55	48	444	를 <u>-</u>	44	63 21	33
NumN	Urban	109	91	97	77	64 12	73	44	55	56	26 6	69 15	19
	Localisation	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other
	Year	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	Average for above ten years	1963

Showing Age Periods, year 1963 T.B.3—Tuberculosis, Notifications and Deaths.

- 1			1							
		Non-Respiratory	Females	_		1	1		1	5
	DEATHS	Non-Re	Males	1			1	1		23
		Respiratory	Females			ı		l	-	
		Respi	Males	1	1	l	1		63	10
		piratory	Females	_	П	67	ಸಂ	-	1	10
	NEW CASES	Non-Respiratory	Males	ı	1	4	21	21	1	92
		Respiratory	Females]	8	4	13	Č.	11	253
		Respi	Males	က	4	4	18	215	7 8	577
		ODO		•	•	•	•	•	•	•
		AGE PERIOD		:	•	:	•	•	•	Total
		7		9	5-	16-	25-	45-	65-	

NOTE.—The figures in small type show additional cases which came to the notice of the County M.O.H. other than by formal notification

T.B.4—Tuberculosis Notifications and Deaths
Urban and Rural Districts, year 1963

	Estimated	Notifica Tuber	tions of culosis	Death: Tuber	
District	population mid-year	Respiratory	Non- Respiratory	Respiratory	Non- Respiratory
Urban					
Ashby-de-la-Zouch	7,560	2		-	
Ashby Woulds	3,370	_	_	_	
Coalville	26,840	15	2	1	
Hinckley	42,000	3	1	1	
Loughborough M.B.	38,990	11	4	1	
Market Harborough	12,020	2	1	1	-
Melton Mowbray	16,310	8	2		***
Oadby	14,050	_	1		
Shepshed	7,420	2	1	_	1
Wigston	23,440	6	-		-
Totals	192,000	49	12	4	1
Rural					
Ashby-de-la-Zouch	13,680	2	1	_	-
Barrow-upon-Soar	60,200	8	5	3	1
Billesdon	20,810	6	_		-
Blaby	60,380	7	***	2	1
Castle Donington	10,040	2	_	_	1
Lutterworth	13,060	2		1	
Market Bosworth	28,240	2	1	1	
Market Harborough	9,310	3	_	_	_
Melton and Belvoir	18,770	1	-	-	-
Totals	234,490	33	7	7	3

Care and Rehabilitation of Problem Families

The Senior Medical Officer, Dr. Marjorie L. Campbell, who was the Council's Co-ordinating Officer for Problem Families has submitted the following report:

1963 was the last full year in which the co-ordination of the work of voluntary and statutory bodies in the care of problem families domiciled in the County was undertaken by a Medical Officer of the Health Department. The Children's and Young Persons Act, 1963, Section 1, which came into effect on 1st October, 1963 extended the powers of Children's Authorities in taking action to prevent or remove conditions that might result in children coming into or remaining in care and for the first time permitted giving assistance in kind or, in exceptional circumstances, in cash. It was decided at a joint meeting of representatives of the Children's and Health Committees on 31st December, 1963 to recommend that the responsibility for work with problem families should come to the Children's Department, that the three Special Family Case Workers should be transferred to the staff of the Children's Department and that the Children's Officer should take over the responsibility of Co-ordinating Officer for Problem Families, these changes to take effect from 1st April, 1964. For this reason the tables shown on this report include the first quarter of the year 1964.

TABLE I

Year	• •	• •		1957/58	1959	1960	1961	1962	1963	1964	Total
Total number	er of n	ew cases re	ferred								
each year				88	61	46	54	43	43	4	339
Number of	cases	closed end	1958	19	_	_	_	_	-	_	19
Number of cases closed end 1959				9	11	_	-	_	_	_	20
Number of cases closed end 1960				14	11	4	-	_	_	_	29
Number of	cases	closed end	1961	26	20	15	6	-	_	_	67
Number of	cases	closed end	1962	5	1	6	9	2	_	Pro-	23
Number of	1963	4	3	4	10	10	4	_	35		
Total num	ber o	f cases	closed								
between 1	1957 a	and 31.3.64	Ł	77	46	29	25	12	4	_	193
Number of c	old cas	es re-intro	duced								
in:	1959	• •		1	_	_	-	_	_	_	1
	1960	• •		3	1	_	-	_	-	_	4
	1961	• •		2	_	_	_	-	_	-	2
	1962			8	2	2	2	_	_		14
	1963			1	1	1		_	-	_	3
	1964			_	1	1	_	1	-	_	3
Total numb	er of	cases on fi	les at								
31.3.64		• •		26	20	21	31	32	39	4	173

The 1963 figures approximate very closely those of 1962. It will be noted that there were still 26 families from as far back as 1957/58; the majority of

these showed a marked improvement but for such reasons as mental instability, low intelligence, ill health of one or other parent, failure of breadwinner to remain in employment and, in two cases, desertion by the father, it was found necessary to retain their names on the problem family file although visiting had been curtailed. Only one family remained from 1957. One other family which had been almost hopelessly involved in debt and which is now regarded as one of the outstanding successes of a Special Family Case Worker still requested occasional visits from that Worker for consultation before undertaking any new commitments.

TABLE 2

Cases closed during 1963 and up to 31st March, 1964

Reasons for Paternal

Reasons for Closic

Reasons for Referra	1		Reasons for Closing	
Unsatisfactory housing		3	Family moved out of L.A. area	 8
Debts and mismanagement		14	Sustained improvement	 24
Parental disharmony		7	Children taken into care	 3
Dirty homes		4		
Parental mismanagement		5		
Mental instability		2		
		35		35

The number of cases closed because of sustained improvement shows a rise on the 1962 figure of 23 even allowing for the extra Quarter year. This, in my opinion, is due to earlier requests for help from Local Housing Authorities and to the fact that there were three full-time Special Family Case Workers for the full period under review.

TABLE 3

Source of Reference		1958	1959	1960	1961	1962	1963	1964
Local Authority		36	20	23	23	11	17	3
Health Department		24	20	13	14	15	11	1
Children's Department	• •	8	7	2	4	1	3	-
Education Department	• •	4	5	1	1	3	3	-
N.S.P.C.C		3	4	2	1	2	-	
Probation Department		1	2	_	2	5	4	
National Assistance Board		1		2	1	1	1	-
General Practitioner		1	-	1		and the same of th	1	
Clerk of the County Council		1	_		_	_	, marie	
County Councillor		1			1			
District Nurse		1	dermak	_	_		_	_
Diocesan Moral Welfare		_	1		_	_	_	_
Solicitor		_	1	_		_		
Minister of Religion		_	1	_	_	_	_	_
Employer		_	_	1	1		_	_
Psychiatric Social Worker/Doctor		_		1	1	1	gathing	_
H.M. Prison Officer					1		_	_
					0.0	*******	1	* * * * * * * * * * * * * * * * * * * *

continued on next page

Table 3 continued			1958	1959	1960	1961	1962	1963	1964
Police Officer	• •	• •		_	_	1		_	_
Family Service Unit	• •	• •			_	1		_	_
Magistrate		• •	-	_	_	1	_		_
Family themselves		• •	_	_	_	1	3	2	_
Hospital Almoner		• •	_	_	_	_	1	_	_
M.P	• •	• •	-	_	_	_	_	1	_
						<u> </u>			_
			81	61	46	54	43	43	4
				—		-			

There is no significant change in the source of referrals.

TABLE 4

								Up to
Primary cause of being	g refe	erred:	1959	1960	1961	1962	1963	31.3.64
Child neglect	• •		7	2	4	3	_	_
Cruelty to children			4	_	_	_		-
Debts, including rent arrears			16	24	24	13	19	3
Parental disharmony (includ	ling ca	ises of						
desertion of one parent)	• •	• •	7	4	5	7	7	_
Dirty homes			3	4	7	3	3	_
Mental instability of one or 1		arents	5	7	6	6	3	_
Parental mis-management	and	non-						
attendance at school		• •	16	5	8	2	4	_
Mental retardation	• •		3	_	_	1	1	
Unsatisfactory housing include	ding ev	viction						
from private houses	• •	• •	_			8	6	1
				_	_	_	_	
			61	46	54	43	43	4
						—	-	—
Number of Co-ordinating Committees held—1963 21 Number of Co-ordinating Committees held up to 31st								
March, 1964		• • •	•	•	• •	• •	8	

Number of Cases Undertaken by the Special Family Case Workers in 1963 and up to 31st March, 1964

	1963	Up to 31.3.64
Number of cases under supervision during period	125	108
Number of cases under supervision at end of period	96	106
Number of cases supervised under Rent Guarantee Scheme	:	
during period	26	25
Number of cases under Rent Guarantee Scheme discharged		
during year	5	1

Cases transferred to Children's Department on 31st March, 1964 109
Returned to Health Department after the Children's Officer had perused these—making good progress and need no longer be supervised by Family Case Workers 10

As mentioned in previous reports, excepting Local Housing Authorities referrals for rent arrears which make up nearly half the number of cases, it is most difficult to assess the primary reason of their referral as most of them include three or four of the conditions listed above. Unsatisfactory private housing remains a source of concern especially with large families living in dilapidated caravans. Two such cases were the subjects of conferences this year and presented great difficulty. First, it is nearly impossible to get such families re-housed even when they are willing to accept a fixed way of living because as transients they have no claim on Housing Authorities. Second, they are usually moving along the County borders and can and do disappear into the adjacent County if unwilling to accept advice or send their children to school, re-appearing later in another Housing Authority area, and third, even if they remain within the County boundaries and are concerned about education they are moved by the police from time to time. This roaming existence prevents their children being entered on any school register. The nature of their business also creates difficulty as most are scrap merchants and their unattractive litter of scrap makes them unwelcome on any site. At one case conference a plea was made by an officer of a voluntary society for provision of hard standing. We were also concerned with another caravan family but this was not the subject of a case conference.

Whilst it was almost inevitable that with the coming of the Children's and Young Persons' Act, 1963 the responsibility for the care of problem families and the work of co-ordination should properly pass to the Children's Officer and her Department, one cannot close a period of over five years without a slight feeling of sadness. The case conferences, first begun unofficially and in a very small way in 1957, brought a great deal of interest as well as information into the Department; people previously known by name only became personalities and the different viewpoints presented were both instructive and stimulating. Looking back over these years the great contribution to rehabilitation made by the Special Family Case Workers becomes evident. They undertook willingly the heaviest assignments and bore reverses without losing enthusiasm. There were some sad, some happy incidents and some comic ones. The Case Worker whose car was forced into a ditch by a road hog driver and who was rescued, consoled and brought home-luckily uninjured—by the most errant of Problem Fathers who happened to drive past the scene moments later in the car which was his latest extravagance. The family, moved to an East Coast County, who still demanded and expected that their own Case Worker should visit them as usual. The eleventh hour reprieve of a mother actually entering a railway carriage with her escort en route for prison, by a Case Worker dashing down the platform with the money he had managed to raise to pay her debts. The Health Department has lost much by the departure of these resourceful and dedicated people.

The changeover was effected smoothly on 1st April, 1964 and I should

like to end this report by thanking once again all the colleagues in County Council Departments, in National and Local Government and in Voluntary Services for their unfailing support and encouragement to me during my term as Co-ordinating Officer.

Chiropody Service

The Council's Scheme was started in 1960 and details are given in the Report of that year. Since then it has increased steadily as is shown by the figures below. There are now 55 organisations providing a service and on the whole the urban areas are reasonably well covered.

The decision to entrust this work to the voluntary organisations appears to be justified and there is no doubt at all about the value of the scheme and the appreciation shown by the recipients. A review of this service is being undertaken and it is probable that some changes in detail may result although it seems unlikely that any major alteration in the administration will be necessary.

The figures below show the expansion during the year, although there are certain areas, especially, though not entirely, the more rural areas, which are difficult to cover.

Year	Number of organisations approved at end of year	Number of sessions	Number of sessional treatments	Number of domiciliary treatments
1960	15	398	3,845	414
1961	32	1,243	11,179	2,096
1962	46	1,787	15,824	3,851
1963	55	2,213	19,362	5,300

SECTION 29 Domestic Help Service

It will be seen from the statistics that although the number of home helps on the register shows a slight decrease compared with last year's figures, the number of hours actually worked was slightly increased.

				,	Year 1963	Year 1962	Year 1961	
Full-ti	me Home He	lps			33	32	35	
	me Home Hel	-			414	431	409	
	number of Ho	-	covered		3,611	3,369	3,247	
Daily a	ttendances of	Home I	Helps		119,848	111,792	106,945	
Home	Help hours	• •	• •	• •	579,591	551,776	528,362	
Housel	nolds assisted	· · · · · · · · · · · · · · · · · · ·						
Mate	ernity		• •		821	820	829	
	eral illness				303	316	347	
	erculosis		• •		12	16	19	
Chro	onic sick	• •	• •		215	200	204	
Aged	d: Ill and Infi	m			2,237	2,000	1,822	
Nigl	nt Help				3	1	4	
Prob	lem Families		• •		12	7	11	
(R	eferred by Co-	ordinati	ing Commi	ittee)				
Othe	er Emerge <mark>nci</mark> es	S			8	9	11	
Averag	e home help h	ours per	household	d per				
weel		• •	• •	• •	$7\frac{7}{12}$	8-1-2	$8\frac{5}{12}$	

Of the additional 242 cases attended, 237 were in the aged group. There is little doubt that the very severe wintry conditions experienced during the early part of the year accounted to some extent for this increase and also for the increase in the number of daily attendances by home helps. Every endeavour was made to cater during this difficult period for the aged and chronic sick especially those living entirely alone and in need of care not only throughout the week but during week-ends. Considerable demands were made both on the home helps and on the organisers to enable these emergencies to be met and our thanks are due to them for the way in which they responded to those demands.

Two decisions were taken on policy during the year which will have some effect on the future of the service. The first was the proposed introduction of a supplementary service as an extension of the present home help service. Suitable neighbours will be engaged as auxiliaries as and when possible and will make morning and evening visits to nearby householders who are in need of care and attention which cannot reasonably be provided by the ordinary

home help service. They will perform various duties according to the assessment of the need made by the Area Organiser in each case, e.g. attending to fires, hot water bottles, hot drinks, etc; in return for those services the auxiliary will receive a weekly payment. This service will only be provided for old people already in receipt of some assistance from the home help service and will be very carefully supervised. It was not possible to make a start on the service during the year 1963.

The second decision related to charges made for the service. From the 1st of April, 1964 no charge will be made to long-term cases which are almost entirely old people and chronic sick. The majority of those cases already receive, after assessment, a free service. This scheme has not, of course, operated during 1963 and it will be interesting to note the effect of the change in the future years.

During the year the Washing Centre at Market Harborough was opened and this has helped considerably in the provision of an adequate service in this area. It is situated in the block of Old Peoples' Flatlets provided by the Market Harborough Urban District Council, very close to the Area Offices. The Hinckley and Coalville Washing Centre continue to provide a much appreciated service during the year. Up till now the Washing Centres have only provided for cases in receipt of a home help but it has now been agreed that the facilities should be extended to suitable cases who are being cared for by their own relatives. It is thought that this can be done by the provision of additional equipment but without the requirement of additional staff.

During the year four 12-Day Courses of Instruction for Home Helps were held and were attended by 90 home helps.

Mental Health Act, 1959 Mental Health Service

Mental Illness

The work undertaken by the Mental Welfare Department is changing in pattern and it is now accepted that it is better for many patients to live in their own homes, given a sympathetic background and the help of an experienced Social Worker, whose scope of work is necessarily widening. This work requires specialised after-care and visits of longer duration; consequently fewer visits can be undertaken by the Mental Welfare Officers. I am still concerned about the number of mentally ill patients admitted to hospital under Section 29 of the Mental Health Act (Emergency) but have every hope that with the help of all concerned the number will decrease.

Following the recommendation in the Younghusband Report there has been a regrading of posts in the Department, the establishment being one Principal and three Senior Mental Welfare Officers, assisted by four Mental Welfare Officers or Welfare Assistants. One Mental Welfare Officer has commenced to study at Lanchester College, Coventry for the two-year course for a National Certificate in Social Work.

Mental Illness Statistics

1					s by Mental Wel r Mental Health	
				Males	Females	Totals
Section 25	• •	• •		7	16	23
Section 26	• •	• •	• •	8	4	12
Section 29	• •	• •	• •	74	114	188
Informal	• •	• •	• •	64	66	130
	Tota	ls	• •	153	200	353

Number of visits by Officers
After-care and other psychotic patients

3,264

Mental Subnormality

There is still a fairly large list of patients awaiting permanent care in Hospital. Fortunately we have been able, through the good offices of Dr. Valentine, to obtain temporary care for a number of them.

Number of visits by Mental Welfare Officers to Subnormal patients in the Community—2,486.

The Monthly Clinic at St. Martins still operates to the benefit of patients and parents. Dr. Valentine the Consultant has been a source of help and advice.

Guardianship

There are now only five subnormal patients in the South of England. These are visited by Welfare Officers from the Guardianship Society who act as our agents.

Training Centre Statistics

Number on Register 31st December, 1963:

	M	ales	Fem	nales	
Centre	-16	+16	—16	+16	Total
Coalville Junior .	13	_	15	_	28
Coalville Adult	-	30	_	26	56
Hinckley	21	_	10	feed	31
Loughborough	14	_	13		27
Desford	_	50	_	31	81
Melton	7	6	11	8	32
Wigston	28	_	23	_	51
Total .	83	86	72	65	306

County Training Centres

In the past twelve months some 30 new pupils and trainees were admitted to Training Centres. The Committee was fortunate in obtaining the lease of excellent premises for an adult centre at Peckleton Lane, Desford and this was opened in October, 1963. The situation is convenient for Hinckley and Wigston and the south-western part of the County. The centre can also relieve the pressure on the Coalville adult centre. The centre was opened by transferring 36 adults from the Dorothy Goodman Training Centre, Hinckley, followed in December by the transfer of 27 Trainees who were attending the Glenfrith Hospital Training Unit until such time as a Centre was set up to cater for them. The number on the roll at the end of 1963 at the new Desford Centre was 75.

Overcrowding at the Coalville Adult Centre will I hope be eased when the Fire Station Buildings become available as part of the Stephenson House establishment.

The seaside holiday was again provided for by the local Societies for Mentally Handicapped Children who also helped in many other ways in the provision of play equipment, television sets, and Christmas parties for the enjoyment and entertainment of pupils and trainees.

Melton Mowbray Social Club

This Club had another successful year. Competitions were keenly enjoyed, culminating with presentation of trophies by Mr. R. Boocock, Police Superintendent, Melton Mowbray. Members were pleased to see an account and photograph in the local "Times".

There was a days' outing to Yarmouth in July and parties with record sessions were held at regular intervals.

Towards the end of the year there was a change of Staff, due to Miss J. Pugh being transferred to another area. Her services were an asset to the Club and were appreciated by all members.

Conclusion

I would like to thank once more the Medical Superintendents and staff of the Carlton Hayes, Towers and Glenfrith Hospitals for their willing co-operation; Dr. Sylvia Reid has helped our Mental Welfare Officers with lectures and demonstrations at Carlton Hayes Hospital.

NOTIFICATION OF BIRTHS

(Public Health Act, 1936—Section 203)

Notifications of births are received in the Department from the midwives in attendance at confinements. Information is exchanged with the Registrars of Births in order to discover any births not notified or not registered within the statutory time limits of the Regulating Acts. All births are scrutinised for cases of prematurity and illegitimacy and these cases are referred to the Health Visitors for special report and supervision.

Below are particulars of births which were recorded during the year:

				Live	04:11	Transl.
Rintha accurring	vielain alan an			· -	Still	Total
Births occurring w Domiciliary:	ithin the co	unty:		Births	Births	Births
County paties	nts			3,222	28	3,250
Other Author Institutional:	ity patients	• •	• •	13	_	13
County patier	nts		• •	2,137	22	2,159
Other Author	ity patients			308	1	309
				5,680	51	5,731
County hirths occ	arring outsi	la sha C		Markhouse of a consequence	CONTRACTOR	
County births occu	arring outsic	ie the C	Lounty:			
Domiciliary	• •	• •		24	_	24
Institutional	• •	• •	• •	2,637	89	2,726
					delevenda	
				2,661	89	2,750
Net births to Co	ounty reside:	nts:				
Domiciliary	• •			3,246	28	3,274
Institutional	• •	• •	• •	4,773	111	4,884
				8,019	139	8,158

REGISTRATION OF NURSING HOMES

(Public Health Act 1936—Sections 187-194)

All registered nursing homes are visited by officers of this Department and of the Leicestershire County Nursing Association. At the end of the year there were five nursing homes registered in the county.

	Numb	er of beds	3
Address	Maternity	General	Total
The Loughborough Nursing Home Ltd., Radmoo	or		
Road, Loughborough	. 5	5	10
The Old Vicarage Nursing Home, Rothley	_	17	17
Cheshire Foundation Home, Staunton Harold Ha	11 -	42	42
"Berrystead", 1001 Melton Road, Syston .		20	20
"Roundhill", Kirby Muxloe	. 40	-	40
Totals	. 45	84	129

NATIONAL ASSISTANCE ACT, 1948

The National Assistance Act, 1948 (Amendment Act 1962) sets out the powers and duties of authorities in the care of old people and the appropriate circular (No. 12/62) sets out the main problems and emphasises the needs for co-operation between the various bodies concerned including voluntary organisations. There are many people engaged in the care of old people and very many organisations of all types have an interest in this field, not only those which deal specifically with the care of aged but others such as Churches who include this work as part of their normal activities. The need for co-operation between all these bodies is abundantly clear especially in such fields as routine visiting, and in those activities in which the County Council and the District Councils both have powers. A number of conferences have been held during the year to try to arrive at some systematic approach to the whole problem and work along those lines still continues.

COUNTY HOMES

It is increasingly realised on all sides that to keep old people in the community wherever possible is the most desirable way of dealing with what is often a difficult problem. Despite this and despite the increasing efforts of all the authorities concerned-statutory and voluntary-to provide domiciliary services, there is still a legitimate demand for residential accommodation which we cannot satisfy. The Ten Year Plan and its revision has laid an extensive building programme before us. One hears not infrequently the criticism that this necessity is a reflection on the younger generation in not caring for their parents but while this may be true in certain cases, it must be stressed that there are some people making too great a sacrifice to care for their aged parents. Not only is the stress on these younger people very great but with the best will in the world it is often impossible for them to provide the attention which the old person requires. This is borne out many times by the improvement in the condition of an old person after living in a Home for some time, even although previously they have been receiving devoted care from their families. It will be appreciated that many of the old people we admit live alone without anyone to care for them.

The latest new Home—Lenthall House, Market Harborough—took its first residents in November, 1963. The site of the Home had been earmarked by the Market Harborough Urban District Council on their development of the Southern Estate in response to a request from the County Council and it is a pleasure to pay a tribute to the interest shown by the District Council and their officials, and for the help which is still continuing. A number of new features were incorporated in this Home which possesses all the usual amenities now considered essential. No bedrooms contain more than two residents, accommodation being available for 22 in single rooms and 30 in double rooms. The plan provides for a large open sitting space, with room for

about half the residents, immediately inside the main entrance door. This experiment seems to have been a complete success and visitors, residents and staff are brought into immediate contact with one another to mutual advantage. This was also the first new Home to be built with a separate house for the Matron. It is the view of the Committee that not only does this increase the field of applicants by opening the possibilities for staff with families but that, by affording the Matron the opportunity for increased privacy in her time off duty, it helps her to maintain her efficiency and interest when she is on duty. In future Homes as well as a separate house for the Matron, provision will be made in the Home for accommodation for a married Assistant Matron.

It would perhaps be appropriate to mention here the help which the people of Market Harborough and neighbourhood have given to the Home. As soon as building commenced, Mr. R. L. D. Crisp, then Chairman of the League of Hospital Friends of Market Harborough, inaugurated an appeal for the Comforts Fund of the Home and before the first residents were received over £600 had been raised, since handed over in the form of gifts or cash. Having mentioned the Comforts Fund of Market Harborough, I must record the Council's appreciation for all the efforts throughout the County for the Comforts Funds of all other County Homes and to pay tribute to the help given in other ways to the residents of the Homes and the interest shown. Anything which can be done to increase the links between the Homes and the community is most desirable and it is interesting to note that the flow of goodwill is not all one way. In one Home a group of residents take gifts of food, fuel, etc., at Christmas time to old people living alone outside; others hold regular money raising efforts for various activities, etc.

On the subject of links with the community, it is apparent when visiting Homes that residents take an obvious interest in the daily traffic outside the Home and in life outside generally. They try to secure a seat with a view just as travellers in a railway carriage seek a window seat and this factor has an influence on the planning of the rooms. The design at Lenthall House provides three sitting alcoves in the main open sitting area which face a pleasant paved courtyard, and here six people can sit in each alcove and can look out by sitting sideways to the windows and also have sufficient light by which to read without being in the direct glare.

In the orthodox room there is a tendency for the old people to sit with their backs to the wall (and to the windows if they wish to read) and leave a free space in the middle of the room; this leads to a certain rigidity in sitting arrangements with each old person guarding their "own" chair as some token of security, and to consequent difficulty in conversation with other residents apart from the one on each side. The wider space and the sitting alcoves in Lenthall House make the formation of small groups and the easier interchange of residents between those groups more of a possibility.

The next Home to be erected will be for 52 residents at Thurmaston accommodating 32 single and 10 double rooms. The original design incorporated attempts to improve the sitting room accommodation to meet the needs discussed above but some of those areas had to be cut out when modifications to reduce the cost of the building became necessary. Other alterations had to be made to bring the cost within the limits of the Ministry of Health's building formula.

During the year the Development and Maintenance Sub-Committee inspected a number of sites in different areas of the County and a good deal of progress has been made in preparation for our building programme. For each site seen by the Committee many enquiries had to be made and many possible sites investigated and I should like to express my appreciation of the efforts of Mr. N. C. Freer, the Senior Administrative Assistant (County Homes) in this and in all the other activities connected with the administration of the Homes.

Details of the accommodation in homes in the county at the end of the year are given in the following table:

Home			Men	Women	Total
Hastings House, Loughborough			64	60	124
Woodmarket House, Lutterworth	• •		28	41	69
West Haven, Market Bosworth	• •		26	29	55
St. Lukes, Market Harborough	• •		24	23	47
Enderby House, Narborough	• •		29	26	55
Knighton House, Leicester:					
Martin Home				24	24
					4.0
Gloucester Home	• •	• •	4	0	40
Catherine Dalley House, Melton Mow	bray		4	.3	43
Loudoun House, Ashby-de-la-Zouch			4	8	48
Tillson House, Coalville			4	8	48
Moat House, Burbage	• •		4	7	47
*Lenthall House, Market Harborough	• •		5	1	51
Total	• •	• •	171	203	651

^{*}Only partly filled.

At St. Luke's, Market Harborough, temporary accommodation is set aside in the casual block for up to 40 persons.

On 31st December 1963, the number of beds occupied was:
Men 227. Women 396. Temporary accommodation 6*. Total 629.

Accommodation for county cases is also arranged in other homes throughout the country and details of such cases are as follows:

Home		Men	Women	Total
Other local authority homes	• •	5	12	17
Epileptic Colonies	• •	5	3	8
Homes for the Blind	• •	9	21	30
Homes for the Deaf and Dumb	• •	1	1	2
Voluntary Old People's Homes	• •	3	12	15
British Legion Homes	• •	2	-	2
Homes for the Disabled, etc.	• •	7	4	11
Total	• •	32	53	85
	1	6		

MEALS ON WHEELS

This very useful service operated by the Women's Voluntary Service continues to expand and three new areas were added during the year. The number of meals served shows an increase of 10,307 over the previous year, and these were distributed as follows:

• •		• •	6,375
ugh		• •	2,505
• •	• •	• •	1,069
• •	• •	• •	3,502
• •	• •		1,908
	• •	• •	1,891
unstone	and E	nderby	3,348
• •			3,337
• •		• •	5,907
ı		• •	2,875
ch			1,166
			1,102
Muxloe			1,148
• •	• •	• •	2,583
• •	• •	• •	1,860
es	• •	• •	1,369
• •		• •	764
• •	• •	• •	23
	aunstone h ch Muxloe	aunstone and E	aunstone and Enderby Change Control of the Control

In addition to the above there is a Luncheon Club at Loughborough where 2,687 meals were served during the year. At the close of the year arrangements were in hand for county residents on the Eyres Monsell Estate to partake of meals at a Luncheon Club operated on the Estate by the Leicester City Welfare Department.

Renewed appreciation is paid to all who contribute, in whatever way, to making this scheme such a valuable success.

REGISTRATION OF OLD PEOPLE'S HOMES

There are five homes registered in the County:

Address	Number of beds
Hallaton Manor Rest Home, Hallaton	30 (males and females)
Brocks Hill Eventide Home, Oadby	12 (females)
"Aigburth", Manor Road, Oadby	30 (males and females)
"The Willows" Nursing Home, Coventry	
Road, Market Harborough	15 (males and females)
"Sandringham", 74 Coventry Road, Market	
Harborough	6 (males and females)

Housing of the Aged

Reference was made in last year's report to the plans which a number of local authorities were preparing for the provision of housing with welfare facilities subsidised by the County Council. A number of such schemes were completed during the year and a considerable number are in preparation. Schemes were in operation at the end of the year at Enderby, Houghton on the Hill, Ibstock, Kirby Muxloe and Market Harborough. Of the success of those schemes there is no doubt and they provide a substantial contribution to the care of old people with the advantage that they remain in the community. There are, of course, many other schemes provided by the Housing Authorities quite apart from those in which the County Council is interested as the suppliers of help in welfare services. Mention might be made of the old people's dwellings in the vicinity of the County Homes at Coalville and Burbage where assistance of the same type as that provided by a warden is given by the staff of the Homes.

There is a natural tendency when planning facilities for old people to think in terms of a quiet corner away from the bustle and confusion of modern life. Such a conception is far from accurate and the old person likes to keep in touch with what is happening in the world (as is seen when studying life in an old persons' home). As he has less energy to spend on going about it is more than ever important that there should be sufficient activity in the immediate neighbourhood to provide a continuing interest, while it is obviously desirable for dwellings to be close to shops and other public services. It is also desirable that houses for old persons should not be concentrated too much in one place and should, when possible, be scattered among ordinary housing. There are, of course, a number of variations and different ways in which this result can be achieved.

BLIND PERSONS

The routine work of the Institution has continued in its well-formed pattern. The registers of blind and partially sighted persons have been maintained and at 31st December, 1963, the following numbers were registered in the County of Leicester:

8I F

Blind 848
Partially sighted 165

During the year the Home Teaching Staff operating in Leicestershire made 6,698 visits, gave 264 lessons and 80 classes were arranged.

Full employment has been maintained at the Workshops but the cost has been high; one factor being that government and local authority contracts have had to be accepted at dictated prices and not at figures which include a suitable margin for overheads, supervision, etc. It is hoped that this position may be remedied when the organisation set up as a result of the recommendation of the Working Party on Workshops for the Blind is fully operative. This body, Sheltered Employment Advisory Services Ltd., has the responsibility for co-ordinating the activities of Workshops for the Blind in the Country and one hopes that, speaking as it will, with one united voice for all Workshops, its influence upon official purchasing departments will be beneficial to all authorities employing blind labour under sheltered conditions.

The terms and conditions of blind employees in our Workshops will necessarily be affected by the advent of the National Joint Industrial Council for blind people working under sheltered conditions. This comes into being as a result of the recommendations of the Working Party (referred to above). It is, however, as yet, to soon to forecast what these changes will be.

Another aspect of the Institution's work which has been the subject of considerable thought and discussion is the provision of residential accommodation for elderly blind people. It is appreciated that Lyndwood Home for the Blind no longer meets adequately this need and whilst some people argue that elderly blind people should not be segregated from the community in special homes for them, many others believe that the handicap gives those who suffer from it common interests and that many prefer to share a home with others similarly afflicted. The Committee has decided as a matter of policy to provide additional residential accommodation for blind people of both sexes and various schemes have been prepared.

Prebend House Social Rehabilitation Centre has continued to play a very active part in the life of the local blind people in its wide range of activities and has added to the fullness of life of the blind people for whose benefit it exists.

The spirit of co-operation which exists between the Local Authorities, Statutory and voluntary bodies working for the welfare of the blind ensures the best possible service for them and this, coupled with the never failing reservoir of support, encouragement and goodwill from many voluntary helpers makes the task far lighter and more pleasant.

REGISTERED BLIND PERSONS

Number of Blind Persons in Age Groups

	-06	47	51	50	
	85-	101	94	109	
	-08	120	141	138	88
	70-	211	214	198	1963 848
	65-	56	62	78	
	-09	4.7	54	58	
	50-	68	89	75	
DS	40-	41	49	52	
AGE PERIODS	30-	29	30	26	62 26
GE P	21-	23	25	29	1962 826
A	16-	15	13	11	
	11-	10	12	14	
	<u>r</u> c	11	i	∞	
	4-	2		-	
	-£	1	-	-	1961
	2-	-	prosed.		119
	-1	processing the state of the sta	1		
	-0	1	l	i	
H:GH	as at Dec. 31st	1961	1962	1963	TOTALS

HANDICAPPED PERSONS

The policy of ensuring a steady development of services for the Physically Handicapped continues. During the year a second Occupational Therapist was appointed and this has resulted in an improved service. At the close of the year sixty cases were receiving Occupational Therapy and there are homes with the therapists visiting approximately every other week. There is continued difficulty in finding Industrial Outwork suitable for home work, and this is a cause for concern. During the year a Welfare Assistant was appointed, and this has ensured that with the increasing numbers needing help and advice, that regular visiting is done and no one is forgotten.

There has been a steady number of cases referred to this Department for help, advice and registration, and referrals came from every quarter. The Ministry of Pensions and National Insurance War Pensions Office referred a number of War Pensioners and we found that we were able to provide Occupational Therapy for a number of them. As a result of the Ministry of Health Circular 4/63 suggesting that certain of those who were Partially Sighted might derive benefit from services provided for the Physically Handicapped, arrangements have been made with the Leicester and Leicestershire Royal Institution for the Blind to refer appropriate cases. It is quite apparent that many of these are elderly but arrangements have been made with regard to registration of the Partially Sighted within the scheme for the Physically Handicapped.

An Exhibition of Aids and Services for the Physically Handicapped was again held this year, this time in Melton. The Exhibition was widely advertised in this area, with additional help in this direction provided by the Ministry of Labour. Attendance was good for this type of Exhibition, and without doubt proved worthwhile.

Mention should be made of the activities of the Leicestershire Voluntary Association for Cripples Welfare, details of which can be found in their Annual Report, and the British Red Cross Society, who, as agents for the special equipment and aids for the Physically Handicapped provide much help in this direction.

DEAF

The Leicester and County Mission for the Deaf and the Loughborough and District Mission act as agents for the County Council, receiving an annual grant. At the end of 1963 there were 156 county cases on the registers of those two societies. Here again the transitional stage from the educational field to adult life is most important, especially in view of the recent development in early diagnosis training and education of the deaf child.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

A total of 33 daily minders are registered in the county providing approved places for 389 children.

NOTIFICATIONS OF INFECTIOUS DISEASES

Tables I, II and III given below show the prevalence of infectious disease in the county during 1963.

Table I—Original and corrected notifications

Disc	ease		4	Total cases (original notifications)	Total cases (corrected notifications)
Scarlet Fever		• •		96	96
Whooping Cough	• •	• •	• •	226	225
Acute Poliomyelitis: p	aralytic	• •		_	
r	on-paral	ytic		_	-
Measles	• •	• •		4,892	4,907
Diphtheria	• •	• •	• •	-	
Pneumonia	• •			68	68
Dysentery	• •	• •		147	130
Smallpox	• •	• •	• •	-	-
Acute Encephalitis: in	fective	• •	• •	2	2
p	ost-infect	ious	• •	2	2
Enteric or Typhoid Fe	ver	• •		-	_
Paratyphoid Fevers	• •	• •		_	_
Erysipelas	• •	• •	• •	13	13
Meningococcal Infection	ons	• •	• •	6	6
Food Poisoning	• •	• •		44	40
Puerperal Pyrexia	• •	• •	• •	11	2
Ophthalmia Neonatoru	ım		• •	1	_

Table II—Corrected notifications in age groups

		Age groups							
Disease	0-	1-	3	5-	10-	15-	25 and over	Age unknown	Totals
Scarlet Fever		9	10	57	12	5	1	2	96
Whooping Cough	16	60	42	87	9	1	6	4	225
Acute Poliomyeli-									
tis: Paralytic	_	-	_	_	_	_		cano	-
Non-paralytic	_		_	_	_	_	_	-	_
Measles	128	1,003	1,146	2,289	225	63	32	21	4,907
Diphtheria	-	_	_	_	_	_	_		_
Dysentery	3	10	8	40	34	14	21	_	13 0
Meningococcal									
infections	2	-	-	1	2	_	1	-	6

Table II—Corrected notifications in age groups—continued

	~	Age groups (years)					
Disease	0-	5-	15–	45	65 and over	Age unknown	Totals
Acute Pneumonia	4	5	14	20	24	1	68
Smallpox	_	_	_	_	_	_	-
Acute Encephalitis:							
Infective	1	-	1	_	_	_	2
Post-infectious	_	1	_	-	_	1	2
Enteric or Typhoid						~	
Fever		_	_	_		_	-
Paratyphoid Fevers	-		_	-	-	_	-
Erysipelas		_	4	8	1		13
Food Poisoning	3	1	5	2	-	29	40

Table III—Corrected notifications—age groups not stated

Disease		Age group not stated
Puerperal Pyrexia Ophthalmia Neonatorum	• •	2 1

Acute Poliomyelitis

	Original	notifications	Corrected notifications		Deaths (poliomyelitis and polio-		
Year	Paralytic	Non-paralytic	Paralytic Non-paralytic		encephalitis)		
1949	6	6	6	2	10		
1950	46	14	41	10	8		
1951	20	5	17	3	-		
1952	13	3	11	2	-		
1953	28	12	31	11	3		
1954	9	1	7	_	_		
1955	9	6	5	3	1		
1956	7	4	6	1	1		
1957	39	30	34	27	3		
1958	5	3	5	1			
1959	_	-	_	_	- Company		
1960	2	4	2	3	1		
1961	3	1	3	1	_		
1962	5	_	5	_	-		
1963	-	_	_	_	_		

SANITARY CIRCUMSTANCES OF THE AREA

The County Health Inspector, Mr. S. A. Gregory, has compiled this section of the report and those on Housing and the Inspection of Food. I am grateful for his assistance.

WATER SUPPLY

I should like to thank Mr. Fergus Isherwood, A.M.I.C.E., M.I.Mun.E., the Engineer and Surveyor to the Wigston Urban District Council, who supplied the figures given in the table below and which were recorded at the Wigston Sewage Disposal Works, Countesthorpe.

Rainfall in 1963

Rain Gauge	Diameter of funnel		8 in.
	Height of top above ground	• •	9 in.
	Height of ground above sea level		259 ft.

		Total depth	Greatest fall in 24 hours	No. of days with .01 in. or	No. of days with .04 in. or
Month		Inches	Inches	more	more
January		.83	.25	12	7
February		.43	.12	14	4
March		3.45	1.06	20	15
April		2.47	.39	17	15
May	• •	1.27	.21	16	10
June		1.96	.38	17	11
July		1.04	.33	12	5
August		4.35	1.23	21	15
September		2.71	.84	13	7
October		1.40	.61	12	5
November		3.41	.42	21	19
December	• •	0.47	.08	13	6
Totals	• •	23.79		188	119

The rainfall figures for the last ten years:

Year			Rainfa	all in inches	Year			Rain	fall in inches
1954	• •	• •	• •	29.18	1959	• •	• •	• •	17.92
1955		• •	• •	22.11	1960	• •	• •	• •	32.57
1956		• •	• •	26.81	1961		• •	• •	22.76
1957	• •	• •	• •	27.55	1962	• •	• •	• •	22.14
1958	• •	• •	• •	29.45	1963	• •	• •	• •	23.79

Average for ten years: 25.42 inches.

Again the rainfall for the year was below average, with the highest monthly figure in August. There were general shortages of water in the Coalville Urban District Area with restrictions imposed over a period, and in the Ashby and Market Bosworth Rural Districts. Complaints were fairly wide-spread of discoloration of mains water and it would appear that this will continue until old mains are relaid. With the increased use of water from river sources, the layman may wonder what effect traces of detergent may have over a period, on both water mains and consumers. The exceptional winter conditions in the early months of the year, resulted in many supply mains being frozen solid and numerous houses were without water for as long as six weeks.

The table below gives details of water samples taken from wells.

	Satisfa	ectory	Unsatis	factory
District	Chemical	Bacterio- logical	Chemical	Bacterio- logical
Urban Districts				
Ashby-de-la-Zouch	_			_
Ashby Woulds			_	-
Coalville		_		5
Hinckley		47		2
Loughborough M.B.			_	
Market Harborough		2	_	Accomplisate
Melton Mowbray	_	_		_
Oadby	_		—	_
Shepshed	_		_	
Wigston		4		_
Rural Districts				
Ashby-de-la-Zouch		3	_	1
Barrow-upon-Soar	_	3		4
Billesdon		_	_	_
Blaby	_	1		2
Castle Donington	_		_	1
Lutterworth		5		6
Market Bosworth	1	2		3
Market Harborough		_	1	
Melton and Belvoir		20	_	4
Totals	1	87	1	28

137,652 houses have internal water supply, 576 are supplied from external standpipes and 2,795 rely on well supplies. The latter figure is 648 less than in 1962 and the majority of the remaining wells in use, are in isolated areas.

		Urban districts	Rural districts
Piped supplies substituted for well supplies	• •	3	266
Wells closed	• •	3	62
Wells cleansed, repaired, etc	• •	1	6

New Water Schemes completed during the year Billesdon Rural District

New main laid from Halstead to Tilton Station.

Market Bosworth Rural District

New main to serve Belchers Bar, Nailstone.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1961

The following schemes have been submitted by district councils during the year and approved in principle by the county council:

Water Supplies

		E	stimated
Local Authority	Parishes and Areas Affected		cost
Blaby R.D	Thurlaston Extension	•	£3,700
Barrow-upon-Soar R.D.	Cotes Road Area, Barrow-upon-Soar.	•	£5,320
Sewe	erage and Sewage Disposal		
Barrow-upon-Soar R.D.	Seagrave	;	£30,563
Market Bosworth R.D	Peckleton and Kirkby Mallory .	;	£48,500
Melton and Belvoir R.D.	Ashby Folville	•	£7,250
Market Harborough R.D.	Foxton	;	€60,750*
Blaby R.D	Broughton Road, Stoney Stanton .		£3,300
Blaby R.D	Warwick Road, Whetstone		£4,410
*£18,250 to be paid by Prison	n Commissioners		

Section 56, Local Government Act, 1958

Sewerage and Sewage Disposal

Blaby R.D.	• •	• •	Glenfield and Kirb	y Muxloe		No grant on increased cost
Blaby R.D.	• •	• •	Whetstone	••	• •	No grant on increased cost

The total number of schemes now approved is 222, of which 103 are for water and 119 for sewage.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1961 The following grants were approved during the year:

Local Authority	Scheme	Es	stimated Cost £	Ministry Grant £	County Council Grant
Billesdon R.D	Extension Schen	•			
	Glen, Little S Tugby, etc.	•	15,579	260x12	260*x12
	3 37		, , , ,	yrs.	yrs.
		• • • • • •	16,190	no c	hange
Leicester Corporation	•			Yho ag	
	borough R.D.)		65000	1,900	1,900
Leicester Corporation	·	•	4 200		
Makan and Dilad Dib	0.110	• • • • •		1,155	_
Melton and Belvoir R.D.	Cold Overton	• • • •	6,300		276*x12
Melton and Belvoir R.D.	Stapleford		2 500	yrs.	•
Wichon and Belvon R.B.	Stapletoru	• • • •	3,500		153*x12
Blaby R.D	Croft		16,411	yrs. 270×12	yrs. 270*x12
2	Cioit	• • •	10,111	yrs.	
	(Originally)		19,000	306x12	•
	(8		,	yrs.	yrs.
Blaby R.D	Normanton House	e, Thurlas-		J	<i>y</i> =
	ton	• •	1,267	44x12	44*x12
				yrs.	yrs.
	(Originally) .		1,400	51x12	51x12
				yrs.	yrs.
Market Bosworth R.D	Belchers Bar .	• •	5,300	215x12	215*x12
				yrs.	•
Market Bosworth R.D	Markfield (Stage I	(III)	7,928	208x12	200*x12
* 0	T 1			yrs.	yrs.
*Guarantee pay	ment to Leicester (Corporation			

Sewerage and Sewage Disposal

Market Bosworth R.D	Groby (Stage I)	II)	• •	23,700	3,220	3,220
Market Bosworth R.D	Odstone	• •		17,700	4,340	4,340
Market Bosworth R.D	Stapleton		• •	20,270	3,324	3,324
	(Originally)			17,250	2,770	2,770
Billesdon R.D	Tugby			22,520	3,337	3,337
Castle Donington R.D	Castle Doningto	n		27,049	6,310	6,310
	(Originally)		• •	23,115	5,700	5,700
Castle Donington R.D	Castle Doningto	n (Park 1	Lane)	12,879	3,540	3,540
	(Originally)		• •	9,605	2,700	2,700
Market Harborough R.D.	Hallaton, Slaws	ton and	Blas-			
	ton		• •	48,000	7,140	7,140
Ma ket Harborough R.D.	Cranoe			12,500	2,240	2,240
Melton and Belvoir R.D.	Ashby Folville			7,250	879	879

Sewerage Schemes completed during the year

Oadby Urban District

Sewage Disposal Works being completely modernised. New filter and humus tanks in use at the end of the year.

Ashby Rural District

Ashby Road and Atherstone Road, Measham Newbold/Griffydam Newton Burgoland/ Swepstone

Blaby Rural District

Narborough and Cosby Sewage Disposal Works extensions (£49,500). Enderby. Outfall sewer and Forest Road pumping station (£7,400).

Market Bosworth Rural District

Barton-in-the-Beans
Ibstock
Sheepy and Ratcliffe Culey
Bagworth Heath
Odstone.

Melton and Belvoir Rural District

Harby and Hose Ashby Folville sewers laid and works modernised.

SANITARY INSPECTION

Inspection by District Councils

Summary action	Convic-	tons obtained		87	I	-					1	1					6	'	ı	ļ	1	ı	4
Summa	Sum-	issued		63	ı	1	1 1		1	I	1	1			1	1	2	1	1	1	1	ı	4
ved	Statutory	Other		1	6	ئ ا	-	1]		0	1			1	J	5		1	1	1	J	42
Notices ser	Statı	Housing		1	1 5	90	0	7	7	1	1			1	65		4	- 1	1		1	18	166
Number of Notices served	Preliminary	Other		တင့	2 T	150	203	94	9	14	15	403		င်း	48	14	201	22	13	271	48	14	1,682
		Housing] =	105	199	4-	58	10	1	89	41		1	136	14	12	40	1	1	55		989
No. of Inspections	made			1,391	1,224 8.961	9,521	15,005	8,352	1,407	2,435	2,375	4,794		2,247	7,990	7,952	9,067	1,974	2,443	8,985	3,925	5,306	100,654
No. of premises where defects or		(9)		ಕ್ಟ್ರಾ	3 00 30 00 13 00 10 00 10 10 00 10 0	1.351	602	813	210	120	187	750		83	1,092	43	998	97	481	192	148	22	8,543
No. of	complaints	(a)		41.	393	397	593	420	185	215	62	678		85	781	43	341	97	481	221	155	18	5,219
				•	•	• •	•	:	:	•	•	•		•	:	:	•	:	•	:		•	•
				•	•			•	•	•	•	•		•	•	•	•	•	•			•	•
		District	Urban Districts	Ashby-de-la-Zouch	Coalville	Hinckley	Loughborough M.B.	Market Harborough	Melton Mowbray	Oadby	Shepshed	Wigston	Rural Dietriote	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	Blaby	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals

CLOSET ACCOMMODATION

The following table shows the position as regards closet accommodation in the county at 31st December, 1963, and includes details of conversions.

Urban District Privies Pail closets Water closets Total Privies Pail closets Outcated closets Urban Districts Asbby-de-la-Zouch 1 14 2,381 2,386 — — — Asbby-de-la-Zouch 1 17 1,122 1,139 — — — Coalville 1 65 9,832 1,488 — — — — Hinckley 1 1 65 16,488 —						Converted to	Converted to Water closets	Privies
uch 1 14 2,381 2,396 — 10 65 9,832 9,907 — 10 65 9,832 9,907 — 10 65 9,832 9,907 — nugh 8 16,380 16,468 — nugh 10 4,334 4,344 — 10 20 2,664 2,694 — 10 20 2,664 2,694 — 10 20 2,664 2,694 — 10 20 2,664 2,694 — 10 20 2,664 2,694 — 11 20 2,664 2,694 — 14 9,380 9,394 — 14 26 3,835 4,565 — 10 20 2,664 2,694 — 11 21 20,000 20,312 — 10 26 3,835 4,565 — 10 26 5,879 6,146 — 10 26 4,365 6,500 3,20 10 26 4,	District	Privies	Pail closets	Water closets	Total	Privies	Pail closets	to Pail closets
uch 1 14 2,381 2,396 — — 17 1,122 1,139 — 10 65 9,832 9,907 — nuch 8 16,380 16,468 — nugh 10 4,334 4,344 — ny 10 5,300 5,310 — ny 10 5,300 5,310 — ny 10 20 2,664 2,694 — nch 14 9,380 9,394 — nch 4 726 3,836 4,565 — nch 4 726 3,835 4,565 — nar 4 263 5,879 6,146 — nuch 4 263 5,879 6,146 — nu 4 263 20,000 20,212 — nu 5 587 3,716 4,308 — nu 948 7,648 8,596 — nu 948 7,648 <t< td=""><td>TT.1.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	TT.1.							
M.B. 1 17 1,122 1,139 — M.B. 10 65 9,832 9,907 — M.B. 8 16,380 16,468 — ough — 10 4,344 — ay — 10 5,300 5,310 ay — 10 5,300 5,310 . — 10 2,664 2,694 . — 14 9,380 9,394 . — 14 9,380 9,394 . — 14 9,380 9,394 . — 14 9,380 9,394 . — 14 9,380 9,394 . — 4,24 19,659 20,083 . — 424 19,659 20,083 . — 424 19,659 20,083 . — 424 26,379 6,146 . — 948 7,648 8,596 . — 948 7,648 8,596 . — 948 7,648 8,596 . — 9460 146,762 151,476 3	Orban Districts	_	7	9 381	2.396	Ì	l	1
10 65 9,832 4,1139 8	Ashby-de-la-couch	-	H 1	2005			1	1
10 65 9,832 9,907 — 88 16,468 — ough 10 83 16,468 — ay 10 4,334 4,344 — ay 10 4,334 4,344 — ay 10 4,344 — — ay 6,300 5,310 — — ay 6,300 4,548 — — out 14 9,380 9,394 — oar 424 19,659 20,694 — oar 424 19,659 20,083 — oar 424 19,659 20,083 — oar	Ashby Woulds	J	17	1,122	1,138	l	l '	1
M.B. 88 16,380 16,468 — ough 8 17,146 17,208 — ay — 10 4,334 4,344 — ay — 10 5,300 5,310 — i — 10 5,300 5,310 — i — 10 20 2,664 4,548 — i — 14 9,380 9,394 — inch — 14 9,380 9,394 — inch — 4 26 3,835 4,565 — inch — 4 263 5,879 6,146 — inch — 424 19,659 20,083 — inch — 424 19,659 20,083 — inch — 424 19,659 20,083 — inch — 424 10,659 20,083 — inch — 5 587 — inch — </td <td>Coalville</td> <td>10</td> <td>65</td> <td>9,832</td> <td>9,907</td> <td>1</td> <td></td> <td>1</td>	Coalville	10	65	9,832	9,907	1		1
M.B. 8 54 17,146 17,208 — ough — 10 4,334 4,344 — ay — 10 5,300 5,310 — i — 5 2,664 2,694 — i — 14 9,380 9,394 — i — 14 9,380 9,394 — ouch — 14 9,380 9,394 — outh — 4 726 3,835 4,565 — ioar — 4 263 5,879 6,146 — ioar — 4 263 5,879 6,146 — ion 30 100 3,698 3,828 — ith — 948 7,648 8,596 — ivoigh 1 112 3,700 3,830 1 ivoigh 1 164 791 5,545 6,500 32 ivoigh 1 254 4,460 146	Hincklev	1	88	16,380	16,468	l	ıΩ	l
ay 10 4,344 4,344 ay 10 5,300 5,310 5 4,543 4,548 20 2,664 2,694	Loughborough M.B.	∞	54	17,146	17,208		l	l
ay — 10 5,300 5,310 — 5 10 10 5,300 5,310 — 5 10 10 20 2,664 2,694 — 5 10 10 20 2,664 2,694 — 6 14 14 19,689 2,694 — 6 14 19,689 20,083 — 6 14 10 10 10 10 10 10 10 10 10 10 10 10 10	Market Harborough	1	10	4,334	4,344	1		l
buch	Melton Mowbrav	1	10	5,300	5,310	1	1	l
ouch 10 20 2,664 2,694 — ouch 4 726 3,835 4,565 2 oar 4 726 3,835 4,565 2 oar 4 726 3,835 4,565 2 oar 4 263 5,879 6,146 — on 30 100 3,698 3,828 — th 5 587 3,716 4,308 — ough 112 3,700 3,830 1 Ivoir 164 791 5,545 6,500 32 y 4,460 146,762 151,476 35	Oadhv	1	70	4,543	4,548	1	23	l
14 9,380 9,394 — ouch 4 726 3,835 4,565 2 oar 4 263 3,835 4,565 2 4 263 5,879 6,146 — on 30 100 3,698 3,828 — on 5 587 3,716 4,308 — th 948 7,648 8,596 — ough 3,700 3,830 1 lvoir 254 4,460 146,762 151,476 35	Shepshed	10	20	2,664	2,694	1	1	l
ouch 4 726 3,835 4,565 2 oar — 424 19,659 20,083 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,146 — 6,148 8,596 — 6,148 8,596 — 6,148 — 6,148 8,146 — 6,146,762 151,476 35 — 6,146 — 6,146,762 151,476 35	Wigston	1	14	9,380	9,394	l	1	1
ouch 4 726 3,835 4,565 2 our 4 224 19,659 20,083 — 1 263 5,879 6,146 — 2 12 20,000 20,212 — on 30 100 3,698 3,828 — th 5 587 3,716 4,308 — th 948 7,648 8,596 — lyoir 164 791 5,545 6,500 32 254 4,460 146,762 151,476 355	Rural Districts							
v-upon-Soar 424 19,659 20,083 — don 4 263 5,879 6,146 — don — 212 20,000 20,212 — Donington 5 587 3,716 4,308 — rworth 5 948 7,648 8,596 — st Bosworth 18 112 3,700 3,830 1 rt Harborough 164 791 5,545 6,500 32 Totals 254 4,460 146,762 151,476 35	Ashby-de-la-Zouch	4	726	3,835	4,565	63	36	1
lon 4 263 5,879 6,146 — 100 212 20,000 20,212 — 100 3,698 3,828 — 100 3,698 3,828 — 100 3,698 3,828 — 100 3,698 3,828 — 100 3,698 3,828 — 100 3,698 3,828 — 100 3,698 3,828 — 11 3,716 4,308 — 112 3,700 3,830 1 11 164 791 5,545 6,500 101 4,460 146,762 151,476 35	Barrow-upon-Soar	1	424	19,659	20,083	1	30	1
Donington 212 20,000 20,212 — worth 30 100 3,698 3,828 — worth 5 587 3,716 4,308 — st Bosworth — 948 7,648 8,596 — st Harborough 18 112 3,700 3,830 1 n and Belvoir 164 791 5,545 6,500 32 Totals 254 4,460 146,762 151,476 35	Billesdon	4	263	5,879	6,146	1	23	1
Donington 30 100 3,698 3,828 — worth 5 587 3,716 4,308 — st Bosworth — 948 7,648 8,596 — st Harborough 1 112 3,700 3,830 1 n and Belvoir 1 791 5,545 6,500 32 Totals 254 4,460 146,762 151,476 35		1	212	20,000	20,212	l	4	1
gh 18	Donington		100	3,698	3,828	•	C 1	1
igh 18 112 3,700 3,830 1 ir 164 791 5,545 6,500 32 254 4,460 146,762 151,476 35			587	3,716	4,308	1	62	i
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		1	948	7,648	8,596	1	22	1
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	gh		112	3,700	3,830		∞	1
254 4,460 146,762 151,476 35			791	5,545	6,500	32	524	l
			4,460	146,762	151,476	35	719	

Public Cleansing

The table below gives details of the cleansing service in the county districts. The majority of the officers in charge of refuse disposal are finding it increasingly difficult to maintain an adequate labour force to cover sickness and holiday periods. The comparatively low rates of pay offered under national agreements make it difficult to keep labour, particularly in the districts bordering the city. It is not until the dustbin is not emptied on the usual day, that the majority of householders give a thought to the service.

			Met	hod of Dis	posal
District	No. of vehicles used	Frequency of Refuse Collection	No. of Con- trolled Tips	No. of Crude Tips	Incinera-
Urban Districts					
Ashby-de-la-Zouch	2	Weekly	l(p.c.)	_	_
Ashby Woulds	1	Weekly	l(p.c.)		_
Coalville	6	Weekly	3	_	_
Hinckley	7	Weekly	1	I*	_
Loughborough M.B.	11	Weekly	1	_	_
Market Harborough	2	Weekiy	1	_	_
Melton Mowbray	3	Weekly	1	_	_
Oadby	3	Weekly	1	_	_
Shepshed	1	Weekly	_	1	_
Wigston	4	Weekly	1	-	_
Rural Districts					
Ashby-de-la-Zouch	3	7 days	3	1	_
Barrow-upon-Soar	8	Weekly	2	_	
Billesdon	4	Weekly	1	_	_
Blaby	12	Weekly	1	_	_
Castle Donington	2	10 days	2	_	
Lutterworth	3	Weekly	_	2(p.c.)	_
Market Bosworth	5	Weekly	_	4	_
Market Harborough	4	Ft'nightly	_	3	_
Melton and Belvoir	2	9 days	5	-	-
Totals	83	_	25	12	_

^{*}Partially controlled for trade refuse where most of the combustible material is burnt. p.c. (Part controlled).

Complaints

58 complaints were received during the year, under the following headings:

General sanitary n	natters		 36
Housing	• •	• •	 19
Water Supplies			 3
			58

Caravan Sites and Control of Development Act, 1960

There are now 81 licences in force for single vans and 13 for sites occupied by more than one van. Little trouble has been experienced during the year and a number of vans were removed from unlicensed sites after informal action. In one case the owner of an unlicensed site was prosecuted and fined £20, with £5 costs.

Shops Act, 1950

Defects	Outstanding from previous year	Defects found	Defects remedied	Outstanding 31st Decem- ber, 1963
Sanitary conveniences Temperature Ventilation Washing facilities Lighting Facilities for taking meals	32	25	25	32
	5	5	3	7
	8	7	6	9
	9	9	9	9
	-	2	2	-
	3	3	2	4

Swimming Baths and Pools

There has been no change in the position regarding public swimming baths, but the enthusiasm for school pools is being maintained. At one school, with a Community College, the pool is used out of school hours and during holidays by adults at a nominal charge.

During the year new pools were completed and came into use at Heathfield School, Earl Shilton; Ashby Grammar School and Whitwick Primary School. Filtration and chlorination plant was also installed at Brooksby Hall. Although the school pools are built by Parent/Teacher Associations, or similar organisations, on completion they are taken over by the county for maintenance. The chlorination and filtration arrangements are subject to approval by the County Medical Officer at the planning stage, and the County Health Inspector makes routine visits, with on-the-spot tests, to all school pools.

Plans are in hand to cover two pools with Filon and it will be interesting to note the effect of improved conditions on the bathing load.

Food Hygiene Regulations, 1955

The public appear to be getting more conscious concerning various foreign bodies in foodstuffs. The following is a short summary of the statutory proceedings.

Bottle of milk containing	plastic to	у	Fined £10 with costs
Mouldy sausages	• •		Fined $£20$ with costs
Mincemeat containing a	match a	and	
bristle			Fined £5 with costs
Loaf of bread with foreig	n objects	• •	Fined £10 with costs
Mouldy cake	• •		Fined £10 with costs
Dirty milk bottle	• •		Fined £15
Dirty milk bottle	• •		Fined £10
Contravention of Regul	ations on	an	
ice-cream van			Fined £40

		No. of premises inspected.	No. of inspections made for the purpose.	No. of informal notices served.	No. of informal notices complied with.	No. of informal notices outstanding Dec. 31st.
Urban Districts: Ashby-de-la-Zouch Ashby Woulds Coalville	• •	19 28 352	56 80 1,031	4 10 30	4 4 32	- 6 38
Hinckley	• •	446	639	28	$\frac{32}{24}$	4
Loughborough M.B.	• •	4 50	2,907	11	11	_
Market Harborough	• •	93	384	36	27	9
Melton Mowbray	• •	30	45	-	_	-
Oadby	• •	45	184	24	21	3
Shepshed	• •	26	38	-	~	_
Wigston	• •	71	285	57	27	44
Rural Districts:						
Ashby-de-la-Zouch		74	81	3	5	1
Barrow-upon-Soar	• •	260	980	71	68	3
Billesdon	• •	35	145	_	_	_
Blaby	• •	322	696	81	102	20
Castle Donington	• •	28	30	3	3	_
Lutterworth	• •	23	23	_	_	
Market Bosworth	• •	23	29	11	11	_
Market Harborough	• •	97	338	12	11	1
Melton and Belvoir	• •	51	301	5	5	_
Totals	• •	2,473	8,272	386	355	129

Pet Animals Act, 1951

19 premises are licensed under this Act and 35 inspections were carried out. At only one shop were conditions found to be only fair from the cleanliness angle.

Rag Flock and other Filling Materials Order, 1951

There are sixteen premises registered for upholstery in the county districts. 6 premises are licensed for the storage of rag flock and one for manufacture, the latter being a bedding firm of repute. No samples of rag flock were taken for analysis.

Clean Air Act, 1956

The Blaby Rural District Council (Glen Parva) Smoke Control Order No. 2, covering 212 premises in the East Lubbesthorpe Ward, came into operation on the 1st November, 1963.

Efforts were made in one mining area to persuade the council to declare a smoke control order, but the matter was deferred for twelve months. In the same district, there are two smoke and sulphur dioxide recording stations using the volumetric method.

Noise Abatement Act, 1960

Complaints of a varied nature including barking dogs, slamming doors and noisy industrial processes, were investigated. In some cases neighbour quarrels appeared to be the root cause of the complaint, and much tact is required in dealing with complaints of this nature. Noise level readings using a meter are invaluable, since what may be stated to be unbearable by a complainant, may be barely readable on a meter. The hosiery industry relies to a varied extent on outworkers, and the machines used by these workers can cause complaint. At one Racing Circuit difficulties have been experienced and discussions have taken place to limit the times of practice and racing.

97 G

HOUSING

Steady progress was maintained in dealing with unfit houses, as the table below demonstrates. The cost of building land generally has resulted in many small sites being cleared of, say, two cottages and then used for a detached house with a small garden. This is particularly welcome in the villages, where previously the demolition of old cottages resulted in sites which became an eyesore and gave the appearance of a run-down community.

	1962	1963
Houses demolished in clearance areas Number of persons displaced from above	203 337	214 186
Individual houses demolished Number of persons displaced from above	257 408	272 436
Unfit houses closed Number of persons displaced from above	76 73	62 168

Approval was given to 281 applications out of a total of 290 for discretionary grants in respect of improvement work on sub-standard houses. 898 applications were also received for standard grants and 884 were approved. The total number of houses improved with grant aid during the year was 866.

House Building

The rate of house building showed an increase over the previous year and it appears that the demand for privately-built houses is far from satisfied. There has been rapid expansion of many villages within a ten-mile radius of Leicester, and sewage disposal works, which have been built in the post-war years, have become overloaded and duplication of units has become necessary.

The district councils completed 692 houses, as compared with 538 in the previous year and private enterprise building was 3,416, as compared with 3,369. The number of houses under construction at the end of the year was 452 local authority and 3,006 private building.

1,784 applications for council houses were received during the year and the total number outstanding in December was 5,135. The majority of council houses being built at present are allocated to families being rehoused in connection with slum clearance. This results in difficult problems

when families receive notice to quit and need urgent rehousing, as there is a limited number of council houses which become vacant through the normal movement of the population.

	Number of Council Houses in District	To Numb Post- Hou Bu	oer of -war uses iilt	comp du	uses pleted ring 1963	Houses in course of erection at end of year			
District	in 1939	Local Auth'y.			Local Auth'y. Private Enter-		Private Enter- prise		
Urban Districts									
Ashby-de-la-Zouch	163	458	338	_	15	25	32		
Ashby Woulds	138	222	78		4		5		
Coalville	538	*1,144	1,351	50	121	25	113		
Hinckley	1,525	1,841	2,664	30	274	40	227		
Loughborough M.B.	1,003	2,066	890	90	78	8	76		
Market Harborough	319	585	876	20	112	_	75		
Melton Mowbray	231	1,079	1,233	98	223	18	113		
Oadby	46	271	2,684		136		143		
Shepshed	217	522	403	30	42	29	74		
Wigston	348	939	3,136	4	421	5	204		
Rural Districts									
Ashby-de-la-Zouch	322	725	444	20	64	29	48		
Barrow-upon-Soar	621	2,251	6,176	4	750	10	470		
Billesdon	14	†312	1,213	6	51	8	79		
Blaby	442	11,580	6,633	90	722	130	928		
Castle Donington	166	680	290	39	10	63	77		
Lutterworth	353	739	644	86	101		66		
Market Bosworth	400	1,444	1,612	64	185	40	153		
Market Harborough	193	454	246	4	59	4	87		
Melton and Belvoir	204	876	496	57	48	18	36		
Totals	7,243	18,188	31,407	692	3,416	452	3,006		

^{*}East Midland Housing Association 48 in addition

[†]Leicester Corporation 2,930 in addition.

[‡]Leicester Corporation 1,840 in addition.

HOUSES MADE FIT HOUSES IN WHICH	After formal notice under Public Health Act, 1957. Sections Sections 9 and 16		1	ı	60 1	I I	-	10	4	1	1	1		ı	16 2	ı	- 9	1	1	1	1	- 10	103 4
UNFIT HO AND HO DEFECTS	After informal action by local authority			11	65	149	250	98	11	4	7	94		22	151	14	92	62	12	301	32		1,374
OLISHED DURING UNDER CT, 1957	Parts of build- ings closed		1	ı	ı	ı	1	1	ı	1	ı	ı		1	1	1	1	1	ı	ı	1	ı	
DEM OSED (TEAR NG A	Closed in pursuance of an undertaking given by owners and still in force		-	ı	—	က	#	ı	1	ı	ı	-		က	က	ı	10	1	40	ı	63	41	72
HOUSES DE OR CLOSEI THE YEAI HOUSING	Demolished as a result of formal or informal procedure		6	l	69	54	18	9	12	20	12	24		11	105	23	34	29	32	12	1	35	491
OUSES	Number of houses found to be in a state so dangerous to health as to be unfit for human habitation		9	30	163	20	21	-	7	12	14	35		7	09	15	170	-1	1	20	∞	18	614
INSPECTION OF HOUSES DURING THE YEAR	Number of houses (included in previous column) inspected under the Housing Consolidated Regulations, 1925 and 1932		ı	1	164	20	21	4	7	1	14	35		1	94	1	170	I	1	1	1	16	545
DC	Total Number of houses inspected for housing defects (Public Health and Housing Acts)		29	85	1,254	861	593	160	180	30	70	089		122	386	39	271	62	265	975	140	289	6,491
	DISTRICT	Urban Districts	Ashby-de-la-Zouch	Ashby Woulds	Coalville	Hinckley	Loughborough M.B.	Market Harborough		Oadby	Shepshed	Wigston	Rural Districts	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	Blaby	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals

INSPECTION AND SUPERVISION OF FOOD

BIOLOGICAL MILK SAMPLING

The milk from herds of producer/retailers of milk is sampled at the farms to obtain a representative milk, and the samples are taken once a quarter. The number of retailers of raw milk is declining with the exception of the more rural areas, where the mileage involved is not attractive to the larger dairies. In some cases, difficulty has been experienced in getting a supply to scattered communities and the Ministry of Agriculture, Fisheries and Food has granted dispensations to farmers who do not bottle the milk. Particular attention is paid to such supplies. 162 samples were taken for biological examination and none were reported as showing evidence of infection with Myco. tuberculosis.

In addition to the guinea pig test for tuberculosis, all milk samples are subject to the Milk Ring Test for Brucella abortus as a routine at the Public Health Laboratory. Any showing ++ Ring Test are followed up with individual cow samples and the Direct Culture method has again proved to be quick and reliable for picking out cows giving infected milk. 99 individual samples were taken. Although there has been good co-operation with the farmers concerned, and infected cows have been removed from herds and sent for slaughter, there is no compulsion on this point and infected cows could be sold on the open market. This could mean that an unsuspecting farmer might introduce infection into a clean herd and this would probably lead to a major infection. Without doubt there should be a Ministry policy of compulsory slaughter of cows giving milk proved to be infected with Brucella abortus, with compensation to the farmer involved.

I am grateful to Dr. Mair of the Leicester Public Health Laboratory for his active interest and co-operation in this work.

Clinical Examination of Cattle

The summary below is taken from the quarterly reports of the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, Mr. Findlay; I should like to thank him for his ready assistance when called upon.

Milk and Dairies:

			Number of
		Number of Herd	Cattle
		Inspections	Examined
(a) Clinical examination of dairy cattle	• •	1,837	64,577
(b) Attested Herd Scheme—number animals examined	of 	151,494	

Brucella abortus

Number	of	calves	vaccinated	against	bovine	contagious	
abortio	n u	nder Ca	alf Vaccinati	on Schen	me		6,175

Milk Pasteurising Plants

Ten plants were in operation at the beginning of the year, but one of these was closed in May when the processing side of the business was transferred to another dairy in the county.

493 inspections of the licensed plants were carried out by the county health inspector and 829 samples of milk were taken for laboratory examination. Five phosphatase test failures were reported, but these were all from a holder plant which had previously given rise to a few unsatisfactory results. In June this plant was re-equipped with an H.T.S.T. pasteuriser and there have been no further failures of the statutory tests.

The re-equipment of the largest dairy in the county was also completed during the year and this is now one of the most up-to-date processing dairies in the country. The speed with which milk, bottles and churns are handled in this completely automatic plant has given rise to some new difficulties, particularly in regard to the inspection of washed bottles. In the older types of equipment every bottle was handled individually and this gave ample opportunity for them to be examined for gross contamination, but in the new plant bottles are handled in batches of sixty at a time. The increased risk of an undetected dirty bottle passing through will easily be appreciated. It is, of course, the responsibility of the dairy management to ensure that milk is filled into completely clean bottles but the public could help a great deal by refraining from using bottles for other purposes and by rinsing bottles before returning them. In the past year cases have been reported of bottles having been used for mixing cement, holding paint and containing toys which have obviously been forced into them.

The routine control of bottle and churn washing plants has continued and the results of laboratory tests show that in general they are efficient. 218 samples of washed bottles and 55 samples of washed churns were taken, of which 17 bottles and one churn were reported as not satisfying the requirements of the Public Health Laboratory. A further 58 samples of washed bottles were taken during follow-up investigations at the dairies.

Type of P	lant	Capacity in gallons per hour	Daily output in gallons
H.T.S.T	• •	1,200	15.000
H.T.S.T	• •	800	3,750
H.T.S.T	• •	350	1,400
H.T.S.T	• •	350	2,400
H.T.S.T		250	1,000
H.T.S.T	• •	350	900
Holder	• •	75	350
Holder	• •	100	100
Holder (contin	uous)	400	2,500

In addition to the samples of milk taken at the processing dairies, 371 samples of pre-packed milk were taken from dealers, either on the rounds or from shops.

Milk to Schools and County Council Establishments

A check is kept on the milk supplied to schools, county homes, children's homes, residential and private schools. With the exception of 13 small isolated schools, all the milk for the Milk in Schools Schemes for the kitchens is pasteurised. 778 samples of milk were submitted to the Public Health Laboratory for the methylene blue test and biological examination in the case of raw milk.

Sch	ools		Tuberculin Tested	Pasteurised	Totals
Grammar	• •	• •		14	14
Modern		• •		20	20
Primary		• •	12	238	2 50
High	• •	• •		14	14
Residential	• •			3	3
Private	• •	• •	1	22	23
Totals	• •	• •	13	311	324

Milk and Dairies Regulations 1963

			Out- standing, 31.12.63		1	1	ł	1	1	1	1	1	1	1		I	l	1	1	1		1	1	1	1
		Distributors	Remedied		1	1	l	1	1	1	1	1	1	1		1	1	1	63	1	1	1	1	1	5
	Contraventions	Д	Found		1	1	1	1	1	1	1	1	l	1		1	1	1	63]	1	1	1	1	23
(Contra		Out- standing, 31.12.63		1	1]	က	1	1	l	1	ı	63		1	1	-1	1	1	1	1	1	1	ಌ
		Dairies	Remedied		1	1	1]	1	1	1	1	1	_		-	63	1	_	1		1	1	1	ō
			Found		1		1	67			1	1	1	က		_	67	1		ı		1	I	1	6
		ctions	Distribu- tors		1	1	9	9	18	15	4	1	1	1		4	∞	1	69	15	61	11	ଧ	20	180
		Inspections	Dairies		1	1	24	13	7	4	9	1	24	က		က	4	1	22	1	12	1	1	1	122
		Register	Distribu- tors		4	9	38	36	21	9	က	7	1	28		23	13	1	30	∞	4	18	12	Ð	241
		No. on Register	Dairies		-	1	10	9	15	23	4	1	4	-		63	-	1	က	1	23	١	1	1	51
					•	:	•	•	:	:	:	•	•	•		•	•	:	•	:	:	:	•	•	:
		Dietrick		Urban Districts	Ashby-de-la-Zouch	Ashby Woulds	Coalville	Hinckley	Loughborough M.B.	Market Harborough	Melton Mowbray	Oadby	Shepshed	Wigston	Rural Districts	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	Blaby	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals

		Number	Number of premises registered	gistered		Number	Number of samples collected	collected	
District		Manufacture and Retail	Manufacture only	Retail only	Grade 1	Grade 2	Grade 3	Grade 4	Total
Urban Districts									
Ashby-de-la-Zouch	•	1	1	32		1	1		1
Ashby Woulds	:	1	1	7	1	1		1	1
Coalville	•	-	1	97	27	9	10	- i	44
Hinckley	•	-		187	6	ಣ		87	14
Loughborough M.B	:			204	1	1	1	er a managama	ı
Market Harborough	:	1		-	1	1	İ]	1
Melton Mowbray	•	ı	1	55	τ¢	1	1		70
Oadby			1	22	15	က	9		24
Shepshed	:	1	1	25	5			1	ð
Wigston	:	1	1	84	84	17	18	?	121
Rural Districts									
Ashby-de-la-Zouch	•	1	1	62	9	1]		9
Barrow-upon-Soar	:	-	ı	182	13		1	1	14
Billesdon	•	l	1	27	1	5	ı	1	70
Blaby	:	1	1	130	142	15	7	1	164
Castle Donington	•	1	1	45	}	1	1		1
Lutterworth	•		1	71				!	ļ
Market Bosworth	:			110	1	1		1	
Market Harborough	:		1	41	İ		1	1	ļ
Melton and Belvoir	:	ı	ı	73	52	ಣ	1	I	52
Totals	:	က	1	1,455	358	53	41	5	454

Per cent of samples within Grade I ... 78.8 % Per cent of samples within Grades I and II .. 90.5 %

MEAT INSPECTION

One slaughterhouse ceased to be licensed during the year, leaving 61 in use. There was a marked increase in the number of animals killed and inspected during the year, the total being 152,760 compared with 116,464 in 1962.

Tuberculosis in cows, which used to be found regularly, is rapidly becoming something which the younger meat inspectors read about, but rarely see. Only 3 cows out of a total of 2,196 slaughtered showed signs of infection with tuberculosis in some organ or part of the carcase. On the other hand, 57 carcases were submitted to refrigeration for cysticercosis as compared with 15 in the previous year. Before the war, cysticercosis was a "text book" disease, which by now will have been discovered, in practice, by most meat inspectors.

District	No. of slaughter-houses	Total No. of animals slaughtered	Total No. of animals examined	No. of knackers' yards	No. of inspections
Urban Districts					
Ashby-de-la-Zouch	1	4,314	4,314		
Ashby Woulds	1	272	272		
Coalville	4	7,199	7,199		
Hinckley	5	9,332	9,332	1	9
Loughborough M.B.	3	4,780	4,780	1	26
Market Harborough	1	44,712	44,712		
Melton Mowbray	1	14,721	14,721	1	5
Oadby	2	9,359	9,359		
Shepshed	1	1,488	1,488		
Wigston	1	2,804	2,804	1	4
Rural Districts					
Ashby-de-la-Zouch	2	2,057	2,057	1	6
Barrow-upon-Soar	9	4,719	4,719	-	
Billesdon	1	761	761		
Blaby	8	16,669	16,669		
Castle Donington	3	6,061	6,061		
Lutterworth	6	1,946	1,856	1	2
Market Bosworth	4	16,868	16,868		
Market Harborough	2	1,520	1,520		
Melton and Belvoir	6	3,178	3,178		
Totals	61	152,760	152,670	6	52

Carcases Inspected and Condemned

	Cattle exclu- ding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	22,664	2,196	895	91,104	35,889
Number inspected	22,656	2,196	895	91,048	35,863
All Diseases except Tuberculosis: Whole carcases condemned	4	14	25	107	54
Carcases of which some part or organ was condemned	4,3 00	917	8	3,194	2,390
Percentage of number inspected affected with disease other than tuberculosis	18.99%	42.39%	3.68%	3.62%	6. 80%
Tuberculosis only: Whole carcases condemned			-	-	2
Carcases of which some part or organ was condemned	15	3			307
Percentage of number inspected affected with tuberculosis	0.07 %	0.14%		_	0.86%
Cysticercosis: Carcases of which some part or organ was con- demned	82	3			
Carcases submitted to treatment by refrigeration	57	2			_

FOOD AND DRUGS

Food and Drugs Act, 1955

The provisions of the Food and Drugs Act, 1955, and other legislation relating to the composition, adulteration, labelling and advertisement of food and drugs are administered by the Inspectors of the Public Control Department of the County Council. I am indebted to Mr. F. W. Arnold, the Chief Inspector, for the following summary of the samples taken during 1963:

			nber	TT	C	
		Obta	ained ————	Unsatis	sfactory	-
Commodity		Formal	Informal	Formal	Informal	Why Unsatisfactory
Foodstuffs:				-		
Milk	• •	-	997*	-	3	2 low in S.N.F.; 1 defi- cient in fat
Almond Flavouring		_	1	_	_	
Almonds, ground		_	4	_	_	
Anchovy Essence		-	1	_	_	
Apples, dried		_	3	_	_	
Aspic Jelly powder		_	1	_	_	
Bacon Snaps		_	1	_	_	
Batter Drops		_	1	_	_	
Beans, dried			7	_	1	In poor condition
Beans, baked		_	2	_	_	TI POOL COMMITTON
Beef, minced		_	$_{6}$	_	_	
Beef, tenderised		_	1	_	_	
Beef essence		_ [1	_	_	
Beef Steak with gravy		_	3	_	$_2$	Low in meat content
Biscuits		_	9	_	_	
Black Pudding		_	8	_	_	
Butter		_	3	_	_	
Buttered Bread, Rolls,	- 1					
cakes or Toast		2	16	2	5	The fat consisted of mar- garine or a mixture of margarine and butter
Cakes and Pastries		-	9	-	-	
Carrots, tinned/dried		-	2	-	-	
Celery Hearts		-	4	-	_	
Cheese		-	6	-	1	Deficient in fat and contained excess water
Chocolate		-	1	_	_	
Christmas Pudding		-	8	-	1	Out of condition. (Old stock)
Coconut		-	1	-	-	
Coffee		-	10	-	_	
Condensed Milk		-	1	-	-	

		nber ained	Unsati	sfactory	
Commodity	Formal	Informal	Formal	Informal	Why Unsatisfactory
Cooking Fat	_	1	_	_	
Cornflour	_	1	_	-	
Crab Salad	_	1	_	1	Low in crab flesh
Cream	_	5	_	_	
		3*			
Cream Cheese	_	2	_	_	
Cucumber in Vinegar		1	_	_	
Demerara Sugar		1	_	_	
Drinking Chocolate	-	1	_	-	
Dripping	_	1	-	_	
Faggots	-	3	_	-	
Fish Cakes	_	6	-	-	
Food Colouring	_	2	-	-	
Fruit, dried	_	4	_	-	
Fruit Pie Filling	_	3	_	-	
Fruit Salad	_	2	_	_	
Glacé Angelica	_	1	-	_	
Gooseberries, tinned	_	4	_	_	
Gravy Browning	_	2	_	_	
Green Tea		1	_	_	
Hamburger and Vegetables	_	1	_	_	
Haslet	1	8	_	1	Contained preservative
Herring Fillets		1	_	_	·
Honey		3	_	_	
Honey and Almond Nut	,				
Cream Spread	_	1	-	1	Insufficient protein to justify "Rich in Protein"
Horseradish Relish		1	_	_	
Ice Cream	-	135**	-	-	
Instant Dessert	-	2	-	-	
Irish Stew	_	3	_	-	
Jam	_	10	_	_	
Jelly		12	_	1	Described as "Containing Real Brandy" whereas only very small amount
T 1		4			omy very sman amount
Lard		4	_	_	
Lemon Curd	1	1	_		Contained as almost de
Macaroon Biscuit Mix	_	1	_	1	Contained no almonds
Margarine	_	2	_	_	
Marmalade	_	1	_	_	
Marzipan	-	7	_	_	
Meat, minced	-	1	_	_	
Meat Pies		2	_	_	
Milk Ice	1	_	-	-	
Milk Powder	-	3	-	_	
Mincemeat	-	4	-		
Octopus, broiled	_	1	-	-	

		ľ	mber ained	Unsati	sfactory	
Commodity		Formal	Informal	Formal	Informa	Why Unsatisfactory
Onion Sauce Mix		-	1	_	_	
Peanuts, salted		-	4	_	_	
Peas, dried	• •	-	3	-	3	Not labelled with ingred- ients
Peas, processed		_	1	_	-	
Pheasant Consommé			1	_	-	
Pickles		-	8	_	_	
Pork Pie		-	6		-	
Potatoes, tinned/dehyd	rated	-	3	******	_	
Potato Crisps/Chips	• •	-	8	-	1	Contained undisclosed salt
Potted Meat		-	4	_	-	
Potted Salmon		-	1	_	-	
Prunes		-	2		*****	
Rhubarb in Syrup	• •	-	6	-	1	In glucose syrup— experimental pack
Rice Pudding		-	2	_	-	r Paragraph
Sago Pudding		-	1	_	_	
Salmon Mayonnaise		-	1	-	_	
Sauce Mix		-	1	-	_	
Sausages, Beef	••	1	5	-	2	l contained undisclosed preservative; l excessive fat
Sausages, Pork		14	$_2$	1	_	Contained excessive fat
Sausages, unclassified		_	1	_	_	Contained excessive fat
Sausage Meat, Beef		-	1	-	1	Contained undisclosed preservative
Soft Drinks		-	16	-	1	Iron Brew contained less iron than stated
Soups, powder/tinned		-	11	-	1	Chicken Noodle Soup low in chicken
Spaghetti		-	2	_	_	10 W III CIMONOII
Spice, mixed		-	3	_	_	
Steak, minced/stewed		-	5	_	_	
Steak Pie		-	6	-	_	
Strawberries, tinned	• •	-	4	-	1	Fruit only 26% drained weight
Stuffing Mix		_	6	_	_	
Suet, shredded		_	1	_	_	
Sweet Corn		_	1	_	_	
Sweets	• •	-	27	-	2	Butter Mints low in butter fat. Chocolate Liqueurs
Table Cream			3			low in proof spirit
Tomatoes, tinned	• •		$\begin{bmatrix} 3 \\ 2 \end{bmatrix}$	_	-	
Veal curry	• •		1	-	-	
Vegetables, dehydrated	• •		6		3	Not labelled dried or de-
	••				o	hydrated dried or de-

	1	imber tained	Unsati	sfactory	
Commodity	Forma	l Informal	Formal	Informal	Why Unsatisfactory
Vinegar, Malt	_	3	_	_	
TT/ 1 1 TO 1 '.	-	1	_	_	
7771 0	-	1	_	_	
Wasan Estada	-	2	_	_	
Beer, Wines and Spirits					
Beer	_	8	_	_	
- 1	_	31*	_	_	
	_	54*	_	_	
Danes	_	38*	_	_	
01	1	7	_	1	"British Sherry" sold as
Vodka	-	15*	_	_	"Sherry"
XX771 * 1	-	55*	_	_	
Medicines, Tonics, etc.					
Analgesic Tablets	_	1	_	_	
1150 11		1	_	_	
A 1 1 577 1 1		2	_	_	
A . T . T . 1	-	1	_	_	
Breakfast Vitamins	_	1	_	_	
O 102 E . T 11	_	1	_	_	
	_	1	_	_	
01 11 1 7 7		1	_	_	
(a) In	_	1	_	_	
0.1170 11:07	-	1	***	_	
	–	2	-	_	
-	-	1	_	-	
77 77 1	-	1	_	_	
0 1 7 1	–	1	_	_	
Glycerin, Lemon and Ipec	1				
		1	-	_	
**		1	_	_	
		2	_	_	
Influenza Cold Mixture	–	3	_	_	
Iron Tonic Tablets	–	2	_	_	
		1	_	_	
Mouth Ulcer Tablets		1	_	_	
Mouth Wash	-	1	_	_	
Multivitamins	-	2	_	_	
Nerve Tonic		1	_	_	
Oil of Juniper Berry	-	1	_	_	
Pain Relieving Tablets		1	_	-	
Protein Nerve Tonic		1	-		
Rose Hip Syrup		1	_	-	No.
Sleeping Capsules	-	1	-	_	

Number Obtained			Unsatisfactory			
Commodity		Formal	Informal	Formal	Informal	Why Unsatisfactory
Slimming Diet		_	1	_	_	
Syrup of Figs		_	1	-	_	
Tonic Wine		_	1		_	
Urinary Tablets	• •	-	2		_	
Vitamin Syrup/Tablets	• •	-	2	_	1	Vitamin Syrup low in vitamins A and C
Worm Treatment	• •		1			
Totals	• •	20	1,771	3	36	
Grand Totals	• •	1,791		39		Y .
Previous Year	• •	1,771		35		

^{*}Samples tested departmentally

The sampling rate for the county was 4.2 per thousand population. From the total of 1,791 samples 39 (2.2%) were unsatisfactory. Defects in labelling, inaccurate descriptions, non-declaration of ingredients, etc., would cause a sample to be classed as unsatisfactory as well as failure to reach the required nature, substance or quality.

The range of sampling is intended to check that food is free from injurious ingredients or extraneous matter, to ensure that it is up to such standards as have been prescribed and that it is truthfully described in advertisement or label and, where ingredients are required to be listed, to verify such listing.

Food producers and food vendors in the County have an interest in providing quality and value to the shopper and this is reflected in the low incidence of unsatisfactory samples and the readiness with which infringements of the Act are remedied. In only two cases was it necessary to institute proceedings. These were in respect of bread and butter and buttered teacakes where in each case the vendor was convicted and fined a total of £4 5s.

Samples have been procured in County Homes, Hospitals and Schools. Particular attention has been paid to school milk supplies.

As the number of unsatisfactory samples remains low, the system of preliminary informal sampling for most commodities has been continued. All informal milk, ice cream and spirit samples are examined departmentally and, in the event of irregularity, formal samples are taken of the suspect commodity for analysis by the Public Analyst.

INDEX

	I	PAGE		PAGE
Ambulance Service		51	Maternity Outfits	37
Ante-natal Services		26	Meals on Wheels	
B.C.G. Vaccination		61	Meat Inspection	106
Biological Milk Sampling		101	Mental Health Service	73
Birth Control		37	Midwifery	40
Births		18	Midwives' Houses	43
Births, notification of		76	Midwives, Inspection of	42
Blind, Welfare of	• •	81	Midwives' Notifications	42
Caravan Sites and Control of D		-	Midwives' Transport	
velopment Act, 1960		95	Milk Pasteurising Plants	
Chest Clinics		59	National Assistance Act, 1948	
Child Welfare Centres		29	Natural and Social Conditions	
		70	Neo-natal Deaths	0.0
Chronic Sick	• •		Noise Abatement Act, 1960	
Chronic Šick	• •	97	Nurseries and Child Minders Regu	
Clinica	• •	$\frac{37}{27}$		0.4
Clinics	• •	09	lations Act, 1948	
Closet Accommodation			Nursing Homes	
Committees			Old People's Homes	
Confinements in Institutions	• •	41	Pet Animals Act, 1951	
Convalescent Home Treatment	• •	56	Poliomyelitis	
County Homes			Population	
Day Nurseries	• •	37	Post-Graduate Courses	
Deaf	• •	84	Prematurity	
Deafness in Young Children		38	Prevention of Illness, Care and	
Deaths			After-Care	
Dental Treatment		27	Problem Families	
Diabetic Health Visiting		56	Public Cleansing	. 94
District Medical Officers of Hea	lth	14	Rag Flock and other Filling	7
Domestic Help Service		71	Materials Order, 1951	. 97
Early Neo-natal Deaths			Rainfall	. 87
Eye Treatment			Relaxation Classes	
Food and Drugs		108	Rural Water Supplies and Sewer-	-
Food Hygiene Regulations		95	age Acts, 1944-61	20
Handicapped Persons		84	Sanitary Inspection	. 92
Health Centres		26	Sewerage and Sewage Disposal.	. 90
Health Education		56	Shops Act, 1950	. 95
Health Visiting		44	Slum Clearance	. 98
Home Nursing	• •	$\overline{47}$	Staff	. 10
Housing		98	Statistics	. 15
Housing of the Aged	• •	81	Stillbirths	. 19
T C	• •	105	Swimming Baths and Pools	95
Immunisation	• •	50	Training Centres	. 74
	• •	$\frac{30}{21}$	Tuberculosis	. 58
Infant Mortality	• •	85		0.0
Infectious Diseases	• •		Unmarried Mothers	. 48
Mass Radiography	• •	59 92	Vaccination	. 48
Maternal Mortality	• •	23	Water Supply	. 39
Maternity Accommodation	• •	45	Welfare Foods	. 39









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THE BLACKFRIARS PRESS LIMITED
SMITH-DORRIEN ROAD, LEICESTER